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## ABSTRACT

The papers presented at this conference consider the many roles counselors play in people's lives throughout their lifespan. The age of technology has aided the practice of counseling in becoming international in scope, although there are different functional frameworks that exist in various political, economic, social, and value systems in world societies. Papers include: "Future of Couple and Family Counseling" (Jon Carlson); "In My Small Village" (Don Hays); "Positive Behavior Intervention for Emotionally Disturbed Children: The Counselor as Team Leader" (Rosemary Peterson and LaVonne Joyce); "Online Support Groups and the Internet: Global Linkages of Emotional Support" (Juneau Gary and Melvin L. Gary); and "Counselors as the Foundation of Global Change" (Doris Skelton). The papers consider the emerging role of counselors in this global society. Each paper contains references. A list of conference participants, a description of 3 pre-conference workshops, conference program and agenda are included. All conference presentations are included. (JDM)

SEVENTH INTERNATIONAL CONFERENCE

# COUNSELING IN THE 21ST CENTURY

SYDNEY-AUSTRALIA  
DECEMBER 29-31, 1998

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**SEVENTH INTERNATIONAL CONFERENCE**

**DECEMBER, 1998**

**SYDNEY, AUSTRALIA**

**C O U N S E L I N G**  
**I N T H E**  
**2 1 s t C E N T U R Y**

**"Relating in a Global Community"**

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JAPAN	Osaka City University
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CHI SIGMA IOTA	Counseling Academic and Professional Honor Society
I.A.M.F.C.	International Association for Marriage and Family Counseling
Q.G.C.A.	Queensland Guidance and Counselling Association

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Dr. Lois EVRAIFF, Northern California Graduate University  
Dr. Don HAYS, University of La Verne  
Dr. Phil HWANG, University of San Diego  
Dr. Nancy SCOTT, Kent State University

## **CONFERENCE ORGANIZERS**

Dr. Bill EVRAIFF, Northern California Graduate University  
Dr. Lois EVRAIFF, Northern California Graduate University

## **CONFERENCE FACILITY**

Sydney Sheraton on the Park

## **TRAVEL ARRANGEMENTS**

Dr. Phillip HWANG, Universal Travel, San Diego, CA

## **COMPUTER ARRANGEMENTS - Michelle Craig and Andrea Zuschin**

**THREE PRE-CONFERENCE WORKSHOPS**

9:00 - 12:00 Workshop 1	Single Workshop	Fee will be \$30 US, \$45 Australian
1:00 - 4:00 Workshop 2	Both Workshops	Fee will be \$50 US, \$75 Australian

ROOM: Castlereagh II      Video Tape Series of Psychotherapy and Family Therapy

Presenters: Dr. Jon CARLSON and Dr. Diane KJOS

1. Workshop 1 will highlight the major contemporary theories of psychotherapy. Participants will not only learn the various approaches but also will be able to carefully watch their application. Videotape presentations of leading experts presenting the theory and then demonstrating with real clients will be used. Theories included are Reality Therapy with Dr. Robert Wubbolding, Cognitive-Behavioral Therapy with Dr. John Krumboltz, Existential Humanistic Therapy with Dr. James Bugental, Brief Therapy with Insoo Kim Berg, Feminist Therapy with Dr. Lenore Walker, Family Therapy with Dr. Ken Hardy, Multimodel Therapy with Dr. Arnold Lazarus, Person Centered Therapy with Dr. Natalie Rogers, Object Relations Therapy with Dr. Jill Savage Scharff, Mind Body Therapy with Dr. Ernest Rossi, Adlerian Therapy with Dr. Jon Carlson, and Integrative Therapy with Dr. Allen Ivey. This videotape series is available for purchase.

2. Workshop 2 will highlight the major contemporary theories of Family Therapy. Participants will not only learn the various approaches but also can carefully watch their application. Videotape presentations of leading experts presenting the theory and then demonstrating with real couples and families will be used. The theories that will be presented are Solution Focused Therapy with Bill O'Hanlon, Object Relations Therapy with Drs. David and Jill Scharff, Internal Family Systems with Dr. Richard Schwartz, Behavioral Therapy with Dr. Richard Stuart, Experiential Therapy with Dr. Gus Napier, Structural Family Therapy with Harry Aponte, Strategic Family Therapy with Dr. James Coyne, Bowenian Family Therapy with Dr. Phil Guerrin, Satir Family Therapy with Jill McLendon, Adlerian Family Therapy with Dr. James Bitter, Culture Sensitive Family Therapy with Drs. Jon Carlson and Mary Arnold, Feminist Family Therapy with Dr. Cheryl Rampage. This videotape series is available for purchase.

Jon Carlson, Psy.D., Ed.D. is a Distinguished Professor in the Division of Psychology and Counseling at Governors State University in University Park, Illinois. He also serves as Director and Psychologist at the Wellness Clinic in Lake Geneva, Wisconsin. He is the author of over 100 journal articles, 25 books and currently edits The Family Journal. Recently he has developed five video series: Brief Therapy Inside Out; Psychotherapy with the Experts; Family Therapy with the Experts; Psychotherapy and Psychopathology; and Basic Helping Skills.

Diane Kjos, Ph. D., is a Counselor Educator at Governors State University, Illinois

9:00 - 4:00 Workshop 3. Fee will be \$50 US, \$75 Australian

ROOM: Hyde Park  
Children's

Using Mediated Learning Experience Parameters to Change  
Behavior: Techniques for Parents and Childrens Providers

Presenter: Dr. Louis H. FALIK

This workshop will present the theory of Feuerstein's concepts of mediated learning experience and theory of structural cognitive modifiability. Introduction to three areas of application: (1) assessment of cognitive functioning: the Learning Potential Assessment (LPAD); (2) the teaching of foundational cognitive functions: the Instrumental Enrichment Program (IE); and (3) mediated learning techniques for parents and childcare workers. In each area, specific instruments and techniques will be illustrated and demonstrated.

Louis H. Falik, Ph.D. is professor of counseling at San Francisco State University and Professor at Northern California Graduate University, executive director of the Western Center for Cognitive Learning and Development, and Training and Research Associate of the International Center for the Enhancement of Learning Potential, Jerusalem, Israel. In this context, he is working directly with Professor Reuven Feuerstein on research and development projects, and is actively involved in training and dissemination activities in the United States, Israel, and other parts of the world. In the United States, he is the primary consultant for dissemination of the LPAD, and provides training in Instrumental Enrichment and mediated learning approaches for parents and childcare professionals.

9:00 - 12:00 Workshop 4 Fee will be \$30 US, \$45 Australian

ROOM: Castlereagh I The Challenge of Change

"The only thing that one really knows about human nature is that it changes" - Oscar Wilde

Presenters: Dr. Mary HONER and Mrs. Winifred STRONG

This workshop will present a practical look at the basic concepts of change, the issues of changing lifestyles, and will focus on the role of the professional providing guidance and support to facilitate change. Major life changes occur at all ages and involve stressors that can energize or hinder coping skills. There are Happy Changes, Painful Changes, and Anticipated Changes, often charged with apprehension, confusion, or grief reflecting a loss resulting from change. Workshop participants will receive and review a Social Readjustment Rating Scale and the AADA Retirement Planning Checklist. These systems can function as tools to help individuals understand their concerns and utilize personal resources as they deal with change.

Mary Honer, Ed.D. is a school psychologist/Consultant, Garden Grove Unified School District, California, President of the California Association for Religious Values Issues in Counseling, Co-Chair, CACD Professional Development Committee, Past-President of the California Association for Counseling and Development, and Past President of the California School Counselor Asso.

Winifred Strong, MA, NCC is a Counselor/Consultant who is retired from Long Beach Unified School District, California, Co-Chair of the CACD Professional Development Committee, Past President of the CACD Association for Adult Development and Aging, and Past Member-at-Large of AADA, 1993-1996.

**WEDNESDAY**                      **DECEMBER 30**

7:30 - 8:30                      REGISTRATION

8:00 - 8:30                      WELCOME

Ballroom II                      Bill EVRAIFF  
Representatives from Sponsoring Universities

8:30 - 9:30                      Program 1: Symposium - New Directions for Relating in a Global Community

Ballroom II                      Moderator: Bill EVRAIFF  
Panelists:

Yoshiya KURATO	Today's Family and Its Future
Esther TAN	The Role of Education in the 21st Century
Julia YANG	When Confucius Meets Parsons in the 21st Century: School Counseling at the Cross Road
Jon CARLSON	Future of Couple and Family Counseling
Don HAYS	In My Small Village
Nancy SCOTT	Higher Education Students in the 21st Century

9:30 - 10:00                      COFFEE AND TEA

10:00 - 11:00                      Small Group Discussions. Groups and rooms to be assigned

11:00 - 12:00                      PRESENTATIONS

Hyde Park                      Program 2: Chair: Judy LADD

Presenters: Janice GALLAGHER and Doris COY  
"A New Emerging Role for School Counsellors: Communication Activity Therapy (CAT) for Families"

Presenters: Rosemary PETERSON and LaVonne JOYCE  
"Positive Behavior Intervention for Emotionally Disturbed Children: The Counselor as Team Leader"

Castlereagh II                      PROGRAM 3: Chair: Yoshiya KURATO

Presenter: Toshihisa KAWAHARA  
"Dependent/Independent Images of the Early Adolescent Boys -- Case Studies through 'Sandplay Technique' and Dream Work"

Presenter: Toyohiko KATO  
"On Social Interactions through the Reported Dreams of Japanese Students By the Hall and van de Castle Scales"

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**WEDNESDAY      DECEMBER 30**

Castlereagh I      PROGRAM 4: Chair: Dorothy SQUITIERI

Presenter: Margaret ARTERO  
"School-Based Adolescent Suicide Prevention Program in Guam"

Presenter: Darlita BLANC  
"Being a Decent Human Being is a Modern Way to Be a Warrior"

12:15 - 1:30      LUNCH      Ballroom II

1:30 - 2:10      PRESENTATIONS

Castlereagh II      PROGRAM 5: Chair: Patricia STEVENS

Presenters: Juneau GARY and Melvin L. GARY  
"Online Support Groups and the Internet: Global Linkages of Emotional Support"

Castlereagh I      PROGRAM 6: Chair: Joseph AFANADOR

Presenter: Doris SKELTON  
"Counselors as the Foundation of Global Change"

1:30 - 3:00      PRESENTATION

Hyde Park      PROGRAM 7: Chair: Nancy SCOTT

Presenter: Yukiko KURATO  
"Changes in Awareness in Japanese Students"

Presenters: Wai-Cheong Carl TAM, Yung-Jong SHIAH and Shin-Kuang CHIANG  
"The Separation-Individuation Process and Culture: A Study on Taiwan's College Students"

Presenter: Julia YANG  
"Understanding Worldviews: Global and Postmodern Perspectives"

2:20 - 3:00      PRESENTATIONS

Castlereagh I      PROGRAM 8: Chair: Herbert CHIU

Presenter: Chi-Hung David HSIEH  
"The Application of Jackknife and Bootstrap Methods to the Small Sample Size Research"



- Castlereagh II      PROGRAM 9: Chair: Robert BENSON
- Presenter: Thomas L. MILLARD  
"Reflections on the Shifting Paradigm in Mental Health Care and No-Fault Therapy"
- 3:05 - 4:05      PRESENTATIONS
- Hyde Park      PROGRAM 10: Chair: Doris SKELTON
- Presenter: Chin-Yen CHEN  
"The Self-Awareness-Training Program in Counselor-Education"
- Presenters: K. Paul KASAMBIRA and Christopher J. RYBAK  
"Training Counselors to Relate in a Global Community Using the Structured Interview Process"
- Castlereagh II      PROGRAM 11: Chair: Betty JACKSON
- Presenter: Susan ZGLICZYNSKI  
"A Global Perspective on Preparation and Practice for Career Development Professionals"
- Presenter: Shu-Hui LIU  
"A Descriptive Approach on Career View"
- Castlereagh I      PROGRAM 12: Chair: Don LINKOWSKI
- Presenters: Laura HEID and Mary PARISH  
"Relating Authentically in a Global Community: A Process of Personal Transformation"
- 4:10 - 5:00      COFFEE SOCIAL

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8:00 - 9:15

**PRESENTATIONS**

Hyde Park

**PROGRAM 13: Chair: Janice GALLAGHER****Presenter: Patricia STEVENS****"What Exactly is a Family?"****Presenter: Shuchu CHAO****"The Influence of Attributions on Evaluation of Marriage for Spouses in Taiwan: Implication for Marital Counseling"**

Castlereagh I

**PROGRAM 14: Chair: Dorothy SQUITIERI****Presenter: Susan RHEE****"Variables Related to Career Success: Korean-American Women of Distinction Tell Their Stories"****Presenters: Carol MINOR and Doris COY****" Understanding Career Choices in Context"**

Castlereagh II

**PROGRAM 15: Chair: Don HAYS****PRESENTERS: Jon CARLSON and Diane KJOS****"Using Video to Link Counseling Theory and Practice"**

9:15 - 9:45

**COFFEE AND TEA**

9:45 - 10:45

**Small Group Discussions**

11:00 - 12:15

**PRESENTATIONS**

Castlereagh II

**PROGRAM 16: Chair: Doris COY****Presenters: Myra PEO and Bonnie HOLLENBECK****"Benevolent Dictation to Guidance Abandonment"****Presenter: Yu-Lan CHEN****"Students' Cognition of the Importance of the Content of Guidance Curriculum"****BEST COPY AVAILABLE**

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**THURSDAY                      DECEMBER 31**

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Hyde Park                      PROGRAM 17: Chair: Christopher RYBAK

Presenter: Joseph AFANADOR  
"Boundaries: The 'Framework' for Psychotherapy"

Castlereagh I                      PROGRAM 18 - Chair: Susan RHEE

Presenter: Herbert CHIU  
"The Adjustment of Young Employees to Their Love Lives and Work Lives"

Presenter: Shu-Hui LIU  
"Do Human Beings Know What They Value?"

12:15 - 1:30                      LUNCH                      Ballroom II

1:30 - 2:30                      PRESENTATIONS

Hyde Park                      PROGRAM 19 - Chair: Paul KASAMBIRA

Presenter: Robert BENSON  
"Alcoholics Anonymous and Counseling: Conflict or Opportunity?"

Castlereagh I                      PROGRAM 20 - Chair: Diane CAREY

Presenters: Don LINKOWSKI and Sylvia MAROTTA  
"Efficacy and Successful Adjustment to Aging"

Castlereagh II                      PROGRAM 21 - Chair: Carole MINOR

Presenter: Bryan ROBINSON  
"Chained to the Desk: Family Dynamics in Workaholic Families"

2:40 - 3:50                      PRESENTATIONS

PROGRAM 22 - Chair: Myra PEO

Castlereagh I                      Presenter: Louis FALIK  
"Using Mediated Learning Experience Parameters to Change Children's Behavior: Techniques for Parents and Childcare Providers"

**THURSDAY**

**DECEMBER 31**

Castlereagh II

PROGRAM 23 - Chair: Dian BENSON

Presenters: Ann HARDIN and Kelly SUKOLA

"Empowering Abused Women: Multicultural Counseling Techniques"

4:00 - 5:00

CLOSING SESSION

Hyde Park

Small Group Highlights

Conference Summary

**HAPPY NEW YEAR!**

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## **When Confucius meets Parsons in the 21<sup>st</sup> Century: School Counseling at the Cross Road**

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Department of Counseling and Guidance  
National Kaohsiung Normal University, Kaohsiung, Taiwan, R.O.C.  
E-mail: jrjy@ms28.hinet.net.tw

### **Introduction**

While the practice of school counseling and guidance has become international in scope, differing functional frameworks exist in various political, economic, social and value systems in world societies. A window of opportunities is available for debate and sharing of professional ideas within a given culture or across societal contexts.

### **School Counseling in the U.S.**

School counseling in the U.S. has had its foundation in social movements and has carried themes of paradigm shift attempting to reflect public needs. In the past century, school counseling first emerged from the Parsons' vocational emphasis, then developed through the impacts of psychometric and mental movements. In the 1990's, a virtual explosion of concerns about the quality of American education (i.e. the National Educational Goals) called for restructuring of counseling services, sometimes to provide remediation of social illness, mostly, to address students' developmental needs. For example, the comprehensive/developmental counseling model proposes the major program components in facilitating students' learning to learn, learning to live, learning to love, and learning to make a living.

### **Paradox of Confucian Influences on School Guidance in Taiwan**

Confucianism has had thousands of years of influences on Chinese societies. Confucian dominance best appears in educational philosophies that guide and teach individuals to live and to be in all life settings such as family, school, work, and society. Such social and moral traditions persist to have both positive and negative impacts on school guidance in the present Taiwanese educational systems. There have been two government sponsored National Guidance Plans (1991-2003) offering decisive support of guidance curriculum development, teacher in-service training, and grants for professional development conferences and research projects. School guidance was first developed by government mandate half of a century ago as an element of national obligatory education. Presently, the highest governing unit for school counseling in the Ministry of Education in Taiwan still carries the name of "Council of Moral Disciplinary". Paradoxically, when counseling receives political support in Taiwan, traditional Confucian values in education and centralized manipulation more than anything else may be obstacle to the development of school counseling as a profession.

### **Student Needs Overlooked but Emerging**

Education, a long enduring Confucian value, is culturally regarded as the only way of achievement in political, social, familial, vocational and financial life. Nevertheless,



encountered with rapid social, economic, and cultural changes, Taiwanese youths, through their extreme reactions, are challenging the practicality of education and struggling daily with traditional Confucian hierarchical relationships in families and schools. A teacher in Confucian tradition who is expected to be first a mentor, then as a counselor, advisor and finally a teacher, now, retrieves to subject teaching with a sense of helplessness. Massive teacher-facilitators with minimal training are thus expected to share counseling responsibilities while counseling-teachers are thrown into crisis intervention or implementing administrative duties.. The concept of life career development as the primary school counseling goal as proposed by our American colleagues is irrelevant to Taiwan school counseling community who has limited recognition of student developmental and career needs.

### **Educational Reform and the Promises the Future May Hold**

Educational reform led by national educational leaders in Taiwan has begun to reexamine issues in education and needs of the youth, and make recommendations for school restructuring since 1994. Goals of educational reform are based on the principles of democracy, humanism, internationalization, technological advancement, and pluralism. Successful reform efforts should lead to a new occupational title: Professional counselors (instead of counselor-teachers) who will assess student needs, provide individual and/or group counseling services, direct guidance curriculum, make referrals and provide system supports to the school and the immediate community. Models of school counseling (instead of guidance) will be explored, experimented and established for effective and accountable services. Professional counselors need to develop professional leadership and utilize technological devices in order to share skills and facilitate building networks for students with diverse needs. Decentralization of policymaking, resources designation and participatory decision-making needs to take place before local program needs can be recognized and fulfilled. Finally, certification and licensure need to be established to ensure quality and ethical service of the profession.

## Opening Panel Presentation - International Counseling Conference - (Family)

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### Future of Couple and Family Counseling

The outlook for couple and family therapists/counselors is especially bright. This approach has become the treatment of choice for so many problems present in today's society. Problems such as eating disorders, substance abuse, child and adolescent behavioral problems, depression, schizophrenia, marital discord, and the list goes on. The mental health field is finally beginning to become aware of the effect of race, class, gender and culture upon individuals. With this knowledge, the importance of the context/system that one resides within takes on new importance. This calls for a change in the therapeutic landscape that will not allow individuals to be understood or treated outside the context of their school, home, or work relational systems. In this changing therapeutic landscape approaches that have research effectiveness will survive. The couple/family therapy field is one that continues to develop many innovative approaches such as solution focused therapy, internal family systems, and narrative therapy. As we move into the new millennium we are becoming more and more aware of the effect that genes and neuro-biology play in human behavior. As our knowledge base increases, focus upon couples and families will only increase.

### Opportunities for Sharing

Since distance learning is currently available, this process allows for the sharing of knowledge far beyond geographical boundaries. Video conferencing, satellite links, email and the internet make the boundaries for learning endless. These services can make a variety of media available whether it is obtaining current material from servers such as [www.amazon.com](http://www.amazon.com) or [www.barnesnoble.com](http://www.barnesnoble.com) using the internet and hooking into existing mental health websites for up to the date audio presentations, or contacting ACA counseling network for ongoing chat discussions. The challenge is to find out what is available where and when.

Important contributions to this learning are already available in the form of video learning packages such as "Family Therapy with the Experts", "Psychotherapy with the Experts", "Brief Therapy Inside Out", and "The IAMFC Family Counseling Series". These programs are

commercially available and can allow professional counselors and counseling trainees to study "masters" practicing their craft. The videos can be slowed down, stopped, and repeated so that accurate learning can occur. The many subtleties that often go unnoticed at first observation become clear through the use of video technology. This same technology will also allow for on-line supervision.

## IN MY SMALL VILLAGE

Donald G. Hays, Ph.D.  
Professor of Education and Educational Management  
University of La Verne  
La Verne, California

Professor Hays is retiring after serving for forty-three years in a variety of educational positions. For the past ten years he has been the Chair of the School Counselor Preparation Program for the University of La Verne. He is a past-president of both the California Counseling and Guidance Association (now the California Association for Counseling and Development) and the American School Counselor Association.

Education is a major key to unlocking the future for the entire human race. Education has enabled us to create the technology that has made it possible to "shrink" the world into smaller and smaller arenas of activity. As a result, it is imperative for us to engage in creating productive relationships with people of all cultures. Therefore, we must come to know each other; and we need to begin now. It is possible to do this through our schools.

Consider what the school of the future in developed countries will look like. It will be located anywhere as long as there is access to technology. The traditional school of the past with a teacher presiding before a group of students is insufficient to meet tomorrow's challenges. Only in those developing countries struggling to meet the challenges of the new century will we see the traditional style of education. New schooling will take place in offices, factories, stores, etc.--any place where we can tap into the communication devices that will allow us to connect with each other. Literally, we can reach out and touch someone nearly any place in the world.

Getting to know each other requires a personal touch. It is not enough to have knowledge about one's race, one's ethnicity, one's country or region of the world. We must come to know each other person-to-person. When I sit down and interact with you on a personal level, I become aware of who you are. I learn about and understand your values, your beliefs, and how you manage your day-to-day activities. Knowing each other at a very personal level means that we can begin to shed our suspicions of each other. We live in a closed system. All we have is right here, right now, on this planet. Every ten seconds the world population increases by 27 people. With a small planet and a large population, each of us wants to lead successful and meaningful lives--not only for ourselves but also for our children and our children's children. Therefore, we have to learn to become neighbors in a small village.

Once I met a man. He was of an indeterminate age but appeared to be very old. It was obvious that he had seen a lifetime of experiences. Looking into his eyes I could tell that he still had a very sharp mind. In a husky voice he said that he wanted to tell me a story. I listened.

"Once upon a time I lived in a small village. It was the only home and village that I knew. I had parents who loved me and taught me many things. I developed my sense of worth, my beliefs, and my values from absorbing my family's heritage as it was passed down to

me from previous generations. All the knowledge that I knew came from my parents until I began to know my neighbors. As I ventured out of doors I met families who lived next door and nearby. My neighbors next door had many similar values but there were some differences also. I learned to deal with the differences in a variety of ways. Some differences I accepted as is. Some I adopted as my own or I adapted them to my value system. Some, I must admit, I fought over. There were times when my neighbor and I could not deal with our differences and we fought each other, convinced that each of us was right. But, in general, we continued to live in harmony in my small village. It was our whole world.

“There were other small villages some distance from ours but I had little, if any, contact with these outsiders. The elders of my village provided whatever protection I needed from these strange people. Occasionally, strangers would enter my village, usually to trade their goods for our goods. We prized what they had and they in turn prized what we had. These strangers spoke funny and dressed funny. My friends and I would often laugh at them. After all, they were different from us and we knew that we were better than they were.

“If our values, our beliefs, our language, differed among these strangers, we reacted often in a violent manner not knowing how to interact with them appropriately and peacefully. Through the interchange of ideas and goods we began to learn about a wider world than our small village--a world greater than we had ever known. We began to travel to other places to see and mingle with other people. But still, the differences in our values, our beliefs, and our language prevented us from accepting one another as equals. As long as we knew that we could retreat to our village, we did not care about others.

“Now, however, my little village has grown. Working with other villages, we became a country. And we discovered other countries. Through many new things we came closer together. What were known as independent, isolated countries similar to separate villages of old, became interlocking entities that are both independent and interdependent.

“We came to know that through our schools and from our learned elders, we might find ways to get along with our neighbors and to become a global community not too different from our small village. If we could become open to learning, we could become open to others. The future of our existence is in our learning to achieve a peaceful, collegial global community. New technology has reduced the time/space factor that existed in the past among countries of the world, and now we are close neighbors. It is necessary to think globally and act locally. With advancing technology, this is possible.”

With that, the old man closed his eyes and drifted into a deep sleep. I was left to ponder how our global villages could become united for a better world. And then an idea came to me. I propose that we begin to relate in a global community by taking one small step at a time. I promise that I will locate an elementary school classroom of third grade students where there is access to the Internet. You need to promise that you will do the same. We will begin a person-to-person communication in which each child in my country and each child in your country will establish a regular e-mail communication on a weekly basis. Under the guidance of a master

teacher/facilitator, the beginning dialogue would be structured to ensure that each child is learning about the other child. Later, as each classroom becomes more technology oriented, the exchange of photos over the Internet could take place. Before long we will have interactive Internet in which instantaneous transmission of daily activities from one classroom to another would take place.

There is a problem, however. Dr. Evraiff talked about reducing the world's population to a village of 100 people and he indicated that no one in the village would own a computer! This means that most of today's technology is found only in the most advanced technology societies. We are privileged to live in communities where technology is well established and within easy reach of most of our citizens. We need to reach out in non-technological ways to learn about people living in less endowed areas. We must find ways to reduce the widening gap between the "haves" and the "have-nots." We need to find ways to communicate with those who do not have the technology we possess. In the meantime, there is much work to be done and we must begin.

Just as a child becomes a friend with a child in another classroom in his or her own country, so will a child become a close friend of a child in another classroom in another country. It takes but two people to initiate this process. They must make a commitment to making sure that the process begins. A Chinese philosopher once wrote that a journey of a thousand miles begins with one step. Who is willing to become a team partner in this child-to-child effort in developing a better world to live in? Who will be my partner as we take the first step of an exciting and optimistic journey?

# **NEW DIRECTIONS FOR RELATING IN A GLOBAL COMMUNITY**

## **HIGHER EDUCATION STUDENTS IN THE 21ST CENTURY**

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for Enrollment Management and Student Affairs  
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As we look toward 2010, changing demographics will affect planning efforts. Higher education futurists predict an acceleration of the demographic trends we are already experiencing: more students will be older, adult learners; more students will have a greater dependence on financial aid and scholarships; more students will not live on campus; more students of color will attend.

Multiple sources predict that the next generation of high school graduates is likely to have more severe emotional and physical problems than any previous generation. Increasing numbers of students will be chemically dependent or come from families with chemical dependency problems. They will have more difficulty making decisions, keeping commitments, and being responsible for their actions than today's college students. Students will be more likely to engage in violent behavior. Students and their families will also be more likely to be involved in litigation at the highest level. And they will arrive on campus with very high expectations for personalized service.

Potential enrollment growth for the foreseeable future will come from older, nontraditional students, students of color, and students who transfer from other institutions. By 2050, African Americans, Hispanics, Asians, and Native Americans will make up 47 percent of the total population. Many of tomorrow's students will have full-time jobs and families, and convenience and attention to individual needs will be important factors in both recruitment and retention. Students will be very focused on career preparation and outcomes. And, because most students will have limited resources to pay for college, cost will be a very significant factor.

The Kellogg Foundation brought twenty five current or former presidents of state and land-grant colleges and universities together to provide guidance on how institutions of higher education might best respond to the unprecedented challenges -- and special opportunities -- offered by a radically changing world. The universities of the future will, necessarily, differ from present institutions in ways that scarcely can be imagined. Many institutions already are inventing tomorrow's university.

The Kellogg commissioners advise us to begin the process of changing by "returning to our roots" and placing students at the center of everything that we do. The commissioners challenge state and land-grant colleges to become genuine learning communities -- communities which are committed to quality instruction and to responding to the individual needs of all learners, anytime, anywhere. It will be important for colleges to keep student's needs regarding quality instruction, the availability of financial aid and scholarships, and personalized attention to their individual needs at the center of our plans as we prepared for a new century of service.



## **NEED FOR COUNSELING SERVICES**

Counseling needs for students have intensified and seem to be more intense and frequent than they were a few years ago -- complaints of stress, binge drinking, violent outbursts, thoughts of suicide, and a malaise of indifference and uncertainty. Newton (1998) shared observations about college students and their lives today as follows:

- Finding a social connection is an overriding and sometimes confusing concern of student life. Needs include references to loneliness, wanting to fit in and find friends, dealing with conflicts, and managing differences. Use of the Internet has added a new form of intimacy as students meet and connect via cyberspace.
- Life is like channel surfing: hundreds of choices and only seconds to decide. Students are experiencing a proliferation of decisions, including the choice of career, lifestyle, living location, and more. Students realize that the world is changing and the predictability of these changes cannot easily be forecast. Newton gives examples of the stock market crashing in Hong Kong and the New York Exchange immediately reacts. An international incident occurs, and within seconds CNN beams an on-site report. This can lead to uncertainty and anxiety for students.
- Students are experiencing an emotional roller coaster with intermittent periods of pressure followed by moments of escape and relief. Students are using a variety of escapes from the worries, deadlines, and decisions pressing them. Excessive alcohol or sleep are examples of trying to get their minds off the demands of school. Counselors report angry outbursts, antagonisms, and abusive behaviors are frequent, while irritation, frustration, and anger are rampant.
- Students look toward the surrounding world with an attitude of wariness and a need to look out for oneself. Isolation and disconnection from support are problems for many students, and suicide is on the increase. Students are sometimes embarrassed to seek support from the services that we provide, and can feel a sense of failure about needing such services. Our services have become more formal, bureaucratic and concerned about ethical or legal standards.
- Students are adopting a "live for today" philosophy. With students living in a world of overwhelming complexity, immediate changeability, and future uncertainty, their response has been to live for the moment and hope that the future will take care of itself.

## **USES OF TECHNOLOGY**

Technology can assist our profession in meeting the challenges presented by our students, as described above. Examples of new technology include:



- Computerized data management of records to help track clients from intake to follow-up. This allows for analysis of data which can be used for an annual report that both summarizes facts and provides anecdotes of counseling service activity and client outcomes. Another technological innovation allows voice response medical dictation systems. Medical records can be scanned into the computer system, thus allowing files to be eliminated.
- State of the art computerized biofeedback equipment to assist students in dealing with stress.
- Internet home pages that can offer self-help topics that enable students, in the convenience of their own rooms, to use the Web to read about, listen to, and interact on issues such as stress management, getting a good night's sleep, and maintaining a healthy relationship.
- Access of research data for the professional staff in order to stay current on new practices and techniques.
- Use of list serves to find other current uses of technology.
- Interactive webpage questionnaires to gather research data from students and to assess outcome evaluations from users of counseling services.

It is important to remember, however, that technology also raises some serious ethical and confidentiality issues regarding email and transmissions. Questions arise such as "Who is accountable for helping someone who is communicating through e-mail? How can you be certain who you are treating?" Budget concerns must also be dealt with as technology is expensive and can be outdated almost as soon as it is purchased.

## **SHARING OF NEW IDEAS AND PROGRAMS**

As counselors are struggling with providing the best support available to their clients, technology can be of great assistance. Participants of the International Counseling Conference could be linked through the creation of a list serve so that contact can be continued beyond the dates of the conference and the distance between colleagues. Sharing of web page addresses, on-line technology sources, collaboration on research or projects, creating outreach and consultation lists, and providing lists of workshops, staff development and training opportunities are all examples of how we could network with each other internationally.

A New Emerging Role for School Counsellors:  
Communication Activity Therapy (CAT) for Families

By

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With school enrollment at an all-time high in America with 52.5 million students in 1998, education will continue to be one of the nation's greatest growth industries well into the next century, according to projections by the U.S. Department of Education. Rising birth rates and a spurt in childbearing among the baby boom generation, as well as immigration and declining dropout rates, school enrollment is expected to grow over the next decade. To accommodate the growth, the U.S. Department of Education in 1997 estimated that 6,000 new schools, 150,000 new teachers, plus other school support personnel will be needed.

The high school level will see most of the growth in enrollment. The U.S. Department of Education has projected a 13 percent increase at the secondary level between 1997 and 2007. Middle school enrollment in grades six through eight has been projected to grow 5 percent.

Elementary school enrollment is projected to remain relatively steady, growing less than 1 percent over the next 10 years.

With an increased enrollment in U.S. schools, it can only be assumed from other data collected that there will be increased opportunities for school counselors to work with students and their families. Data reflective of this assumption is published in the 1998 Kids Count Data Book from the Annie E. Casey Foundation.

\*An estimated 3.5 million children under the age of 13 spend sometime alone at home each week and it is unknown how many other children are periodically unsupervised even for short periods of time.

\*Approximately 23 million children under the age of 13 live in families with income of less than 85 percent of their state median family income.

\*Teen homicides increased from 1,602 in 1985 to 3,292 in 1995 (almost double).

\* Nationally, the teen birth rate increased from 31 per 1,000 females age 15 to 17 in 1985 to 36 in 1995.

\*In 1996, 19 percent (about one-fifth) of everyone arrested for a violent crime were under 18 years of age.

\* The juvenile violent crime arrest rate increased from 305 arrests per 100,000 youth age 10-17 in 1985 to 507 in 1995.

\*Nationwide, 10 percent of teens age 16-19 were high school dropouts in 1995, compared to 11 percent in 1985.

\*The percent of families with children headed by a single parent increased from 22 percent in 1985 to 26 percent in 1995.

What do the few statistics cited above indicate? The response is that along with a growing school population there are in some areas growing problems in our society. Children and their families are often confronted with problems and issues that cause distress. What happens when the children in these families have problems so intense that their behavior in school becomes

unacceptable and leads to suspension or expulsion from the school?

In San Antonio, an urban city with a population in excess of one million people, the Bexar County Juvenile Justice Alternative Programs reports the following:

\*In the 1996-97 school year, 242 youth were sent to the county's alternative school for serious and persistent misbehaviors, that number increased to 280 in 1997-98.

\* The number of students found in possession of drugs and sent to the county's alternative school in 1996-97 was 65. That number increased to 133 students in 1997-98.

\* Students found in possession of weapons (knives, guns, etc.) was 66 in 1996-97 and increased to 77 in 1997-98.

\* Students found guilty of assault in 1996-97 were 12 and in 1997-98 increased to 15.

Each day in Texas schools from 4-6 percent of its enrolled students are not in attendance. According to the Texas Education Agency data, the attendance rate for Texas schools in 1996-95 was 95.1 percent. Local school data indicates that approximately 2 percent of the students not in attendance are truant from school.

As professional school counselors, we are in the unique position of being the first, in many instances, to encounter students with problems. Those problems can vary from academic, personal, social, career, family to any other conceivable issue. As the students encounter problems and as counselors work with students to assist them in solving and overcoming these problems, parents must be included as solutions are developed.

Parents are key to keeping their children in school as productive successful students. Yet today, school counselors know that from time to time every family, regardless of their ability to be seemingly self-sufficient, needs counseling assistance. Families almost daily cope with increasing stressors. Parental responsibilities can be emotionally, physically, and sometimes financially overwhelming. Despite the best intentions, many parents find themselves facing tremendous obstacles as they attempt to understand their children and as they attempt to meet their needs. As parents struggle to be effective, conflicts can occur and the family structure is then in peril, thus arise the need for family counseling.

When interviewing family members in preparing for family counseling, the area which parents

and their children identify as a primary area of concern is “communication.” Parents say that students don’t listen and students respond that parents don’t hear what they are saying nor do they understand. There are simple counseling activities that can be utilized to assist families in learning to communicate, re-establish loving, caring relationships and building or re-building trust.

One of the processes used in developing communications within families is Communication Activity Therapy (CAT). Professional school counselors have the skills, and knowledge to become facilitators for family groups which include parents and children. The incorporation of professional school counselors into family counseling opens new doors of opportunities in school counseling and creates new roles for school counselors who lead these groups.

“CAT” has been successfully utilized in the Harlandale School District by the administrators and school counselors involved in the Family Counseling Program offered on regularly scheduled evenings. Data collected indicates that both parents and their children have benefited from this program. For those taking part in “CAT”, discipline cases were reduced and there were no repeat participants (245 families participated from March 1995 thru August 1997). Students returned to their home schools successfully completing the school year without further incidents.

Let’s look at “CAT” and learn how to implement it. CAT is a series of activities which requires mental, social, and limited physical involvement. Group problem solving skills are employed which offer the opportunity for individuals to share experiences and learn from one another. Through “CAT”, participants have the opportunity to experience personal achievement, have fun, and participate in a pleasant experience. Group problem solving skills are employed to help develop team building, individual confidence, goal setting (long range and short range), conflict resolution, decision making and communication.

Families learn skills by attempting to complete tasks together as a team. When the responsibility for learning rests with the learner (learner-centered), the learners will stretch themselves in unexpected ways. At the end of the therapy activities, family members depart with a sense of satisfaction and of having accomplished something personally meaningful. This kind of satisfaction can be achieved only if the family members are engaged and empowered, not lectured.

Activities are designed to develop participant empowerment in stages. First, team members are presented with a situation or challenge and must develop options or strategies for solving the problem. The solution may or may not be obvious. The activities challenge the participants’ stated aspirations. Such a challenge motivates the participants to respond collectively, bonding together to reach a solution.

At the conclusion of the activity, the team will be excited with its success. Participants are then asked to review and examine what happened and what role did each play in the activity and its subsequent solution. Team members are asked to share their feelings and understandings of the process, their roles, the pitfalls of the experience, and the subsequent solution.

A typical CAT session is designed to take its team members through a series of developmental learning phases. Usually, the session begins with an informal and relaxing activity and is created by getting participants involved through a “warm-up” or “ice-breaker.” The goal is to create a welcome and comfortable environment. The activities, included in this initial session involve games and stretches/movements which are non-competitive in nature and have little or no problem solving (initiatives) component. Such activities help to prepare team members by providing opportunities to-

- \*know other group members,
- \*set the tone for an informed non-competitive atmosphere,
- \*develop group cooperation,
- \*begin to develop a sense of trust,
- \*develop a sense of body and an awareness of movement, and
- \*warm-up physically.

Following the warm-up activity/ies and after the group has relaxed and laughed together, participants are ready to start the trust-building process by taking part in problem-solving activities. Participants are encouraged to develop some basic methods in learning to take care of each other. Activity challenges focus on group problem-solving skills. These activities require team members to collectively solve challenges as a team. Opportunities are provided in the area of-

- \*team building,
- \*self/group esteem, self confidence,
- \*goal setting (short and long range),
- \*conflict resolution,
- \*defining group roles
- \*decision-making
- \*trust development
- \*risk-taking as a team member,
- \*practicing self and social responsibility, and
- \*creative communication.

In facilitating CAT, the sequencing of activities is crucial. Counselor facilitators must consider the group balance, using their group counseling skills so that all participants have a role, are engaged and involved in the activities. Group members must be guided and encouraged to stretch their mental and physical abilities. Only through active participation can group members become empowered to care for themselves and others.

CAT, in simple terms or steps, involves the following key elements:

- \* warm-up, briefing activities,
- \*initiatives, challenges, problem-solving activities,

\*debriefing, assessing individual roles, group responses.

Participants who have been involved in CAT have made the following statements in their evaluations:

“This is the first time our family has played together....” (Parent of 3 teens)

“My mother isn’t as boring as I thought she was, she can laugh,” (Teenager)

“I learned to listen with my ears and my eyes.” (Parent of child with drug problem.

“My father is talking to me. Used to be he talked at me.” (Male teen suspended for truancy.

“I didn’t know my dad really loved me til he hugged me when we did the circle talk.” (Male teen)

CAT is activity filled with process strategies which encourage, engage, and empower students and their families to deal positively with the stressor in their lives. It is participatory communication led by professional school counselors in their new emerging role in providing counseling to the family unit.

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## Positive Behavior Intervention for Emotionally Disturbed Children: The Counselor as Team Leader

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### Introduction: The Hughes Bill

Recognizing the increase of violence in schools and following the death of a student after being restrained, California enacted the Hughes Bill. The Hughes Bill's intention is to provide positive behavioral interventions. It requires a Positive Behavioral Intervention Plan for individuals with exceptional needs with a **"serious behavior problem."** A **"serious behavior problem"** is defined by the regulations as "the individual's behaviors which are self-injurious, assaultive, or causing property damage which could lead to suspension or expulsion pursuant to Ed. Code Section 48900(f) and other severe behavior problems that are pervasive and are maladaptive that require a systematic and frequent application of behavioral interventions" [§3001(y)].

- Emergency procedures should be applied only when safety requires them, and they must not be used as either consequences or punishment or in lieu of a systematic positive behavioral intervention plan.

The Hughes Bill defines **"behavioral intervention"** as the "systematic implementation of procedures that result in lasting positive changes in the individual's behavior. Behavioral interventions are designed to provide the individual with greater access to a variety of community settings, social contacts and public events; and ensure the individual's right to placement in the LRE (Least Restrictive Environment) as outlined in the individual's IEP (Individual Educational Plan). Behavioral interventions do not include procedures that cause pain or trauma. Behavioral interventions respect the individual's human dignity and personal privacy. Such interventions shall ensure the individual's physical freedom, social interaction, and individual choice."

However, the Hughes Bill does not provide for a plan to implement positive behavioral intervention plans. School districts were expected to develop their own methods of implementation to comply with the new law by 1993. Although special education teachers are required to develop plans to meet the social, emotional and behavioral needs of students, most have not been trained in the skills necessary to develop or implement goals or objectives. These are actual referrals from special education teachers to counselors from a Northern California school district:

1. Told him not to call me "man." Loud and disruptive - begging for a referral.



2. I tried to get him to work. He insulted me saying, "Yah, you're sorry all right." He called me a faggot - twice.
3. Reading aloud during silent reading. Says she'll forget if she doesn't read out loud."

When a teacher sends a student out of the room, what does it teach? It is common that teachers react to a crisis by restraining or removing the child without teaching a positive replacement behavior. The child who refuses to take a test or do an assignment may not be defiant; most likely he is not prepared or an emotional crisis is interfering. The child's underlying communication is ignored. This is successful for the child because it removes him from the stressful situation; it is successful for the teacher because it removes the teacher's perception of the problem, the child. The tragedy is that whatever caused the problem behavior remains unsolved within the child. The teacher just doesn't have to deal with it.

Counselors must serve as team leaders to train or provide trainers to address the social, emotional, and behavioral needs of children in all settings. They must educate teachers, parents, administrators and support services personnel in developing positive behavioral intervention plans that teach:

1. understanding another's perspective
2. communication skills
3. consequences
4. conflict resolution
5. concern for the rights of others.

Counselors must assist all team members to learn, relearn and learn again the essential components of Positive Behavioral Intervention Plans:

The Philosophy of Positive Interventions  
Prevention as Best Practice  
Building A Positive Behavioral Plan  
Developing Goals and Objectives  
Assessing and Modifying the Plan

An examination of these critical components reveals a heavy reliance on theoretical principles drawn from learning/behaviorist theory, social learning theory, and the philosophy and teaching practices of Maria Montessori. An understanding of the philosophy underlying positive interventions should serve as the foundation for many educational and counseling practices, not just behavioral interventions. Montessori's concepts of the prepared environment, individualized educational plans, setting up the child for success and the teacher facilitating the child's link with the environment all support this philosophy.

For seriously emotionally disturbed students, it is absolutely critical that positive intervention plans include teaching new behaviors that meet the communicative need of the disruptive behaviors.

### **Philosophy Of Positive Interventions**

(From Wright, et al., 1994, p.2)

- Behavior is communicative and goal directed.
- Settings and environments should be capable of meeting the student's needs before behavioral interventions are used. Behavioral interventions should not be used to force conformity in inappropriate settings.
- The primary goal of any classroom is to educate and teach effective interpersonal skills, not to manage or suppress behavior.

- Behavioral interventions should consider the developmental level and chronological age of the student.
- Behavioral interventions should be developed collaboratively.
- Behavioral intervention plans should be efficient and minimally intrusive in terms of time, labor and complexity.
- Interventions should focus on teaching appropriate behavior to replace maladaptive behavior.

### **Prevention As Best Practice**

- Any changes required to provide a meaningful, accessible and appropriate curriculum and environment should be made before an attempt is made to directly modify the student's behavior.
- The behavior goals should be reasonable and attainable for the student and the goals should be implemented within the context of meaningful instructional activities.
- The primary benefit should be for the student. The student should be taught effective personal skills that may be used across settings. An intervention that focuses on eliminating a maladaptive behavior without regard to the purpose it may serve the student is not a positive behavioral intervention.

### **Building A Positive Behavioral Plan**

1. **Describe the learner.**
2. Identify and operationally **define the behavior(s)** of concern.
  - The behaviors must be specific, measurable and observable.
3. **Conduct assessments.** Assessment begins with:
  - Direct observation
  - Interviews
  - Review of Available Data

Using these sources, the assessment includes:

- **Systematic observation of the occurrence** of the targeted behavior.
  - definition
  - frequency
  - duration
  - intensity
- Systematic observation of the immediate **antecedent** events.
- Systematic observation and analysis of the **consequences** to determine the function the behavior serves the individual.
  - communicative intent
- **Ecological analysis** of the settings.
  - physical setting
  - social setting

- activities and nature of instruction
  - scheduling
  - communication between individual and staff and other students
  - degree of independence
  - degree of participation
  - amount and quality of social interaction
  - degree of choice
  - varieties of activities
  - **Health and medical factors**
  - Review the **history** of the behavior
    - effectiveness of previous behavioral interventions
4. Use the assessment to develop a **Positive Behavioral Intervention Plan**.

### Developing Goals And Objectives For The Positive Behavioral Plan

The intervention plan should include:

- A **summary** of the information gathered in the behavior analysis.
- An objective and measurable **description** of the targeted maladaptive behavior(s) and replacement positive behaviors.
  - Targeted maladaptive behavior: Freddy responds to frustration by punching walls and kicking objects and screaming angry statements, "I hate this school. Fuck this. Fucking teachers," in all classroom environments on an average of two times a day.
  - Replacement positive behaviors: In response to situations that Freddy finds frustrating, Freddy will verbally express his frustration, "I can't do this. I don't want to do this. I don't understand this." Instead of kicking or punching inanimate objects, Freddy will remove himself until he can express his frustration verbally in an appropriate manner, i.e. without using profanities..
- **Goals and Objectives**
  - Goal and objective for the **problem behavior**: "Freddy will not engage in screaming profanities or angry statements when frustrated or kicking objects in the classroom."
  - Goal and objective for **positive replacement behavior**: "Each time Freddy feels frustrated in a classroom, he will tell the teacher what is causing the frustration and seek to negotiate a solution."
  - The **behaviors are specified**. The plan tells where they will be measured and indicates that they are to occur every time a situation becomes frustrating to Freddy.
- Detailed description of the **behavioral interventions** to be used and the circumstances for their use.
  - **Different teaching techniques** that are to be employed to teach alternative positive behaviors **based on the assessment** of the problem behavior.

- How the **environment** will be changed.
- How **direct treatment strategies** are to be used and what **reinforcers** are suggested to increase or maintain alternative positive behaviors.
- Inadequate: Freddy will be taught appropriate ways to handle frustration.
- Adequate: Freddy will be instructed in specific procedures to follow when he feels frustrated and has a need to protest during all classes. These instruction techniques will include role-playing appropriate verbal expressions of frustration with his curriculum support class and modeling. Freddy will be instructed in removing himself physically when he is angry or frustrated and feels he is about to punch or kick walls. He will be instructed as to an appropriate area to use in each class for a "time-out." His voluntary "time-outs" will have a maximum time limit of 10 minutes during the first month and will be reduced in time each week thereafter until "time-outs" are no longer necessary. When Freddy is able to express his frustration appropriately, he will negotiate an alternate or modified assignment or assistance in doing the original assignment. Using an intermittent reinforcement schedule, Freddy will be given "Head of the line" passes for using positive replacement behaviors.

### **Assessing And Modifying The Plan**

- Is the problem decreasing?
- Does the new behavior meet the communicative needs of the student?
- Is the positive replacement behavior increasing?
- Are the instructional techniques effective or do they need modification?
- Are the reinforcers working to eliminate the problem behavior and maintain or increase the replacement behavior?
- Has enough time elapsed to assess the plan?
- Have we met our goal to teach understanding another's perspective, communication, conflict resolution, accepting consequences, and concern for the rights of others?

In conclusion, although teachers may be expected to have the training to develop Positive Behavioral Intervention Plans, without the counselor as a collaborative leader of the team working with the child, plans are too often based on what is least disruptive to the fewest number of people. Immediate results take precedence over the teaching of lifelong coping and social skills. These skills which teach the child to interact in a positive way at school are skills that can prepare him for success in all settings.

Unfortunately, not all children will respond to positive intervention plans despite collaborative efforts. If a child continues to be dangerous to himself and/or others, the counselor must be prepared to support the school, teachers, parents and the child to accept that more restrictive measures may be necessary.

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DEPENDENT/INDEPENDENT IMAGES OF THE EARLY ADOLESCENT BOYS - CASE STUDIES  
THROUGH "SANDPLAY TECHNIQUE" AND DREAM WORK-

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#### INTRODUCTION

The purpose of this paper is to present Japanese early adolescent boys' images, emerging from the counseling process with image methods (Sandplay and dream). The author has made use of them as a mediative method to understand and communicate with clients. Sandplay therapy, has been founded by Kalff, D.M. by adopting the idea of Analytical Psychology, is one of effective methods to psycho-somatic disease using body as mediation, especially to Japanese youths who are generally weak in verbalization. The author described their images in the form of 3 case studies: each case was 12 years old male, had a stomach ache and school refusal tendency. Then the author discussed as follows;

(1) On therapist-client relationship the therapist had a role of senior in Case 1, paternal in Case 2, maternal in Case 3.

(2) The common image characteristic of 3 cases symbolically represented the strength of son-mother affective bonding, making them dependent.

(3) The physical complaint as an obstacle for their adjustment led the therapist to a role, making them independent.

#### CASE PRESENTATION

##### Case 1.

##### (1) Outline of Case 1

Atusi (an assumed name, 12 years old, male) was in the first grade of junior high school. In summer vacation he caught cold. His temperature could not go down, so he went into hospital. When he was put in hospital, his fever went down, but when he tried to go to school, the fever went up. He came to the author to consult with his problem in the form of counseling. His chief complaints were fever, stomach ache, and school refusal tendency. While we had 16 sessions for 6 months, he made 15 sandplay images. First he showed his infantile omnipotence, then regressive images. When he was in his second grade, he became able to go to school without problems.

##### (2) Series of selected sandplay images

Sandplay 1 (#1): "Fighting."

Sandplay 2 (#2): "Extending construction of zoo." Atusi explained that on Sunday a family enjoyed in the zoo, but a mother with two babies left one alone.

Sandplay 9 (#9): "A scene of lakeside." He explained that at the water's edge a mother and babies were at their ease.

Sandplay 12 (#14): "Struggle against evil." He said that a hero struggled against evil from a town to protect a forest with animals.

Sandplay 13 (#14): "Putting down by a big deer."

In the last session #16 three cyclic images were made by him.

Play (#16): "Relationship between eating and being eaten."

Sandplay 14 (#16): "Relationship between shooting and being shot." He said that these relationships led to extinguish everything.

Sandplay 15 (#16): "Relationship between intervention and watching over." He

said that people on lower side of the circle said to the boy, "you must not do this and that," people on upraised of the circle said, "you'd better to do this and that." And Atusi added that a tourist on the opposite side of the boy was only swinging his hand, meaning "you are all right as you are."

## Case 2.

### (1) Outline of Case 2

Takeo (an assumed name, 12 years old, male) was in the first grade of junior high school. On the morning of the entrance ceremony for junior high school, his father went to a shop to take son's school uniform. On the way home back he fallen down and broke his legs. So he was hospitalized, then Takeo got angry and nervous. After this he became to have a stomach ache, loose bowels, nausea and violence against his mother. Takeo and the author had 9 sessions for 4 months.

Takeo had been frustrated by his parents. He felt his mother too interfering and his father incompetent. Five years ago the father had lost his mother (Takeo's grandmother) and been injured at work. Since then he became depressive and began taking medicine for depression. He had not been able to work. The author gave Takeo's mother consulting guidance about Takeo's feelings and needs. So he became ease and able to go to school.

After 3 years since then, he came back to my counseling room. Then he was 16 years old, had given up senior high school because of his heart beating fast and his body unsteady. Takeo and the author had 6 sandplay sessions for 4 months. First he could not touch sand, but put toys on the sand, thereby became aware of his problem. Through this therapy he could be a member of a basketball team in his community and had a part-time job. From next year he has entered into a part-time high school.

### (2) Series of sandplay images

Sandplay 1: "People in the countryside" revealed his family images.

Sandplay 2: "A safari park." There was no framework that gave a border and a way.

Sandplay 3: "Just before starting."

Sandplay 4: "A labyrinth." He said that he was unable to get a view of his way and future.

Sandplay 5: "A marathon." He said he was not there. He could not find his place in the community.

Sandplay 6: No title. He explained that there were man and wife lived in this tree-house and they welcomed two friends who visited them for pleasure.

## Case 3.

### (1) Outline of Case 3

Sinobu (an assumed name, 12 years old, male) was in the first grade of junior high school. He had a pain of his stomach for several months. By a medical checkup he was nothing wrong. Recently he suddenly felt an acute pain at night and had a school refusal tendency. He had come to see the author for counseling.

In our 3 months counseling, he had complained of a matter of unbalanced meal and mealtime, because his mother had been mentally confused for she had a money problem among relatives for several years. Also she had a persecuted anxiety and delusion, and she had not done housekeeping.

The author gave him an advice about how to manage and keep his balanced living, for example the way of living, meals, sleeping and so on. So he has become able to keep regular living, felt ease, and been able to go to school.

Four years later he came back to my counseling room. Then he was 16 years old, had given up senior high school because of his stomach ache. In our



counseling, he told many dream images for 2 years. Then he felt no pain and entered to a correspondence course in high school level.

(2) Series of selected dream images

Dream 1 : " At night I was in a lakeside hotel in the mountains, water in a pool and a lake suddenly moved in swirl and rose up as a waterspout. Thunder and lightning made me so fearful that I was unable to stand up and to run away." Sinobu said his impression that he was usually terrified and caught by cruel ideas.

Dream 2 : " I was waiting for a train with my mother on the platform. I saw a man in 20's had a knife and threatened passengers in a coming train. As I suddenly stood just before him, he stared at me and stabbed me with the knife in my forehead. I was covered with blood and stared back at him." Sinobu associated his cruel feeling to be alone and patient with his pain.

Dream 3 : "A young woman was freely riding a big horse in an open green meadow under the blue sky."

Dream 4 : "An old man in black clothes attacked me. I shot him but he got up again. I hit his face and he fell down. Then a brightly gold face appeared and said that the old man used to be a lion, it could not know good from evil so that its body was divided into halves, the good part became the gold face and the bad one became the old man." Sinobu said about this dream that he also could not tell good from evil.

Dream 5 : "An alien sat holding a baby. Suddenly the alien began to swallow and vomit the baby again and again." Sinobu associated this dream with his being in torture.

Dream 6 : "An American old psychologist and I met an American infant boy. He had a teddy bear. We asked him about his bear. He said 'nursing mother' or 'nothing mother'."

Dream 7 : "My mother came back home and gave me a lunch box with sandwich and spaghetti." Sinobu said about this dream that he felt so relieved because he could finally have a meal.

Dream 8 : "I was a counselor. There were two children. One was the elder sister and she was healthy. Another child was androgynous, the upper half of the body had a figure of girl with girl's face and the lower half of the body had a figure of boy with boy's face on its belly. This boy's face told me that his father did not give him even the kidney." Sinobu said about this dream that the boy's face was on the place where he had a pain.

Dream 9 : "I was caught by a boss of enemy and locked in the gas chamber. There were two supportive women. One gassed the boss and another led me into breathing in air."

Dream 10 : "A champion of a combative sport said to me that I was physically unable to fight in the top class but able to fight in the second class."

#### DISCUSSION

In case 1 Atusi represented his hero's images in sandplay, he wanted to have an ideal image of the younger. The author had a role of senior revealed as the tourist in sandplay 15(#16). In case 2 Takeo and his father both lost their way to express their feelings. The author told Takeo's mother their feelings. The author had a role of paternal to show them the way in the 'labyrinth' (sandplay 4). In Case 3 Sinobu was alone and confused. The author gave him an advice about how to manage his living. The author had a role of maternal like 'two supportive women' in dream 9.

The common image characteristic of 3 cases symbolically represented the strength of son-mother affective bonding, making them dependent. For Atusi in case 1, it was a turning point to express the regressive scene at 'the water's



edge' in sandplay 9. For Takeo in case 2, his violence against his mother was independent struggle against mother's interfering. For Sinobu in case 3, the 'alien' in dream 5 was his image of mother. He needed to have maternal images like 'two supportive women' in dream 9.

When the client has physical complaints as mediation of his emotional conflict, he wants to satisfy his regressive needs in the passive form of dependence. If the therapist can play a mediative role between client's needs, he is going to represent his conflict with images instead of physical complaints. In case 1 Atusi represented his fever and stomach ache as 3 cyclic images in sandplay 15(#16), then the author played a senior role. In case 2 Takeo represented his body unsteady as the 'labyrinth' (sandplay 4), then the author told him the way and had a role of paternal. In Case 3 Sinobu represented his stomach ache as 'boy's face' in dream 8, then the author listened to him and had a role of maternal. The physical complaint as an obstacle for their adjustment led the therapist to a role, making them independent.

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Yamanaka, Y. (1993): On the Preadolescent Crisis from the View Point of Sandplay Therapy, Archives of Sandplay Therapy, 6-2, p.85-92.

Toyohiko Kato has been interested in dreams, especially these of adolescence. His way of analysing dreams is from a standpoint of psychoanalysis. He is a licenced clinical psychologist and serves as Associate professor at Kinki University in Japan.

In Japan, there have been a number of studies on dreams, but there has been no study of dreams using the Hall-van de Castle scales. For this reason the author conducted a comparable study between dreams which were collected in 1996/7 and in 1986/87.

This investigation addresses two questions ; 1) Have the contents of the dreams been changed in 10 years? 2) Are there any sex difference in 10 years?

In this report, characteristics in social interaction, aggressiveness, friendliness and sexual interactions in dreams were collected and compared.

## METHODS

The author collected 1000 dreams according to the Hall-van de Castle scale norms for five dreams each of 50 males and females undergraduate students in '86/87 and '96/97 at Kinki University, Kansai University, and Seito Women's Junior College. These students come from about the same socioeconomic levels, that is the middle and upper-middle classes. Their dreams were collected in psychology classes in respective universities. The dreams were reported by the students in standardized report forms.

The author selected folders - each of which contained a series of 10-15 dreams - that had been obtained from students between the age of 18-21. The 5 dream reports that met the criterion, that is, the report should be written with in 50-300 words in length were randomly selected from the folders of 100 male and 100 female undergraduate students. Although the Hall-van de Castle system of content analysis comprises a large number of categories, the following categories were selected: characters; aggressiveness, friendliness, and sexual interactions.

Scoring of all these dreams based on the Hall and van de Castle was done by the author.

Four character classes were scored: animal, creature, human characters; males, females, both characters, and indefinite, and familiar-unfamiliar. Familiar characters are those known to the dreamer and family members, relatives, friends and acquaintances, and prominent persons. Unfamiliar characters are those the dreamer does not know or cannot identify.

Three social interactions were scored: aggression, friendliness and sex. Aggression involves physical aggressions that included murder, attack, chasing-confining, and destruction and verbal aggressions that involved serious threat, verbal activity, and covert feeling. Total aggressions were divided by the number of characters and dreams. Friendly interactions included marriage, physical contact, inviting·dating, helping·protecting, gift·loan, verbal means, and covert feeling. Total friendliness was divided by the number of characters and dreams. Sexual interactions meant sexual intercourse, petting, kissing, sexual overtures, and sexual fantasies. Total sexual interactions were divided by the number of characters and dreams.

The formula for the significance of the difference between male and female, and the '86/ '87 reports and the '96/ '97 reports was applied. The significance level was either at 0.05 and 0.01.

## RESULT

Comparisons of Character between males and females, and in the '86/87 reports and the '96/ '97 reports are presented in Table 1.

Table 1

		average per a dream ( SD )			
Character		'86/87		'96/97	
Male	m:3.82 ( 2.72 )	f:2.98 ( 2.06 )	m: 4.60** ( 2.61 )	f: 2.58 ( 1.95 )	
Female	m:1.96* ( 1.76 )	f:3.64** ( 2.16 )	m: 1.24 ( 1.36 )	f:3.44* ( 2.61 )	
Familiar	m: 4.38 ( 3.24 )	f:5.86* ( 3.34 )	m: 4.46 ( 2.95 )	f: 4.94 ( 2.82 )	
Unfamiliar	m: 3.34 ( 2.36 )	f:3.32 ( 2.73 )	m: 3.56 ( 2.40 )	f: 3.30 ( 2.89 )	
Animal	m: 0.48 ( 0.97 )	f: 0.38 ( 0.67 )	m: 0.44 ( 0.81 )	f: 0.64 ( 0.94 )	
Creature	m: 0.10 ( 0.30 )	f: 0.12 ( 0.33 )	m: 0.10 ( 0.30 )	f: 0.12 ( 0.33 )	

T test    \*: p < 0.05    \*\*: p < 0.01

As to the characters, there are five significant differences. As to the male characters, there is a sex difference in the '96/97 reports : males have a higher proportion than females. As to the female characters, two sex differences: both females in the '86/87 reports and the '96/97 reports have a higher proportion than their counterparts. A chronological difference is seen in males: the '86/87 reports males have a higher proportion than ones in the '96/97 reports. For familiar characters, there is a sex difference: in the '86/87 reports, females have a higher proportion than males.

Comparisons of Social interactions between males and females, and in the '86/87 reports and the '96/97 reports are presented in Table 2.

Table 2

average per a dream ( SD )

Social interactions	'86/87	'96/97
total agg.	m: 2.90 ( 2.19 ) f: 2.72 ( 1.58 )	m: 3.10 ( 2.77 ) f: 2.84 ( 2.48 )
physical agg	m: 1.94 ( 2.00 ) f: 1.30 ( 1.34 )	m: 1.94 ( 2.06 ) f: 1.70 ( 1.84 )
verbal agg.	m: 0.96 ( 0.96 ) f: 1.42* ( 1.18 )	m: 1.16 ( 1.58 ) f: 1.14 ( 1.67 )
Friendliness	m: 1.82 ( 1.56 ) f: 2.48* ( 2.37 )	m: 1.50 ( 1.34 ) f: 1.62 ( 1.32 )
Sex	m: 0.44* ( 0.91 ) f: 0.02 ( 9.14 )	m: 0.16 ( 0.58 ) f: 0.08 ( 0.27 )

T test \* :  $p < 0.05$ , \*\* :  $p < 0.01$

As to the social interactions, there are three significant differences. As to the verbal aggression, there is a sex difference in the '86/87 reports: females have a higher proportion than males. As to the friendliness, there is a chronological difference in females: the '86/87 reports females have a higher proportion than these in the '96/97 reports. As to the sex, a sex difference is seen in the '86/87 reports: males have a higher proportion than females.

From the viewpoint of a dynamic analysis of dreams, correlations of items which are categorized in Character, Aggression, Friendliness , and Sex that are divided with males and females both in the '86/87 reports and in the '96/97 reports are examined by the Pearson's correlation coefficient.

Animals are correlated with some of aggressions (including aggression, physical aggression,

and verbal aggression) in the '86/87 and the '96/97 males and the '96/97 females except the '86/87 females. Male characters are correlated with physical or verbal aggression in all. While for the '86/87 males, female characters are correlated with verbal aggression, too. Unfamiliar characters are correlated with physical aggression in all except the '96/97 males.

As to the friendliness, correlations with males and females in the '86/87 reports, males in the '86/87 reports females, and females in the '96/97 reports are seen. And there are correlations with familiar characters in the '86/87 males, with unfamiliar characters in the '96/97 females.

As to the sex, there are correlations with the opposite sex except the '86/87 females, because one person of the '86/87 females reported a witnessed interaction by other female, not a dreamer herself.

## DISCUSSION

Hall reported that there had been very few changes in what college students were dreaming about in 1980 compared with dream reports in 1950, while times had greatly changed since 1950. For instance there has been, it is said, a sexual revolution, a liberalizing of attitudes about sexual behavior. In this report as to the Japanese males and females also, investigated from a point of view of chronological differences, there have been no great changes in the differences and similarities of their reported dreams by the Hall and van de Castle scales between in the 1986/87 reports and the 1996/97 reports, and there have been a few changes in sexual differences, as Hall pointed out.

Although there are a few changes through the content analysis method, some changes in correlations of items of content analysis scales are found. The differences are seen in relation to aggressiveness and friendly actions with male and female characters and familiar and unfamiliar characters between in the '86/87 reports and the '96/97 reports are discovered. Through a restricted number of dreams, the author would like to point out that the representativeness of the unstableness and the surface of human relations have partially had an effect on dreams, though the author would not suggest the continuity hypothesis that all dreams are continuous with waking life. Today in Japan, it is said that adults can't understand what young men and women think about because of their poor and surface interactions, or so called "sirake" in Japanese.

□

# School-Based Adolescent Suicide Prevention Program In Guam

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This paper reviews school-based suicide prevention programs in the United States and Guam. Recommendations for effective suicide prevention and intervention programs, in particular for Guam public schools, are included.

## Facts About Adolescent Suicide in the United States and Guam

The National Institute of Mental Health (NIMH, 1998) reported that, with a rate of 13.3 per 100,000, suicide in the United States is the 3rd leading cause of death among young people 15 to 24 years of age; surpassed only by unintentional injuries and homicide. The suicide rate for children ages 10-14 was 1.7 per 100,000 and for adolescents ages 15-19, 10.5 per 100,000. The male to female ratio for the 15-19 age group was 5.6 to 1. The suicide rate for youth ages 20-24 was 16.2 per 100,000 and the male to female ratio for this age group was 6.4 to 1. Adolescents are the only age group whose mortality rate has increased due to suicide over the last 20 years in the United States (Kalafat & Elias, 1995).

The United States Territory of Guam has also experienced an increase in adolescent suicide. During 1970-1983 only one adolescent suicide was recorded (Salas & Stillman, 1985). This is in sharp contrast with the 28 adolescent suicides recorded during 1988-1996 with a rate of 18.67 per 100,000 (Guam Department of Public Health & Social Services, 1988-1996). The age range of these adolescent suicides was from 10 to 19 years. Of the 28 suicides, 21 were males and 7 females; a 3 to 1 ratio (Guam Police Department, 1996).

## The Island of Guam

The population of the Island of Guam is approximately 150,000 and is multicultural. Besides the indigenous people of Guam, the Chamorus, the other cultural groups are from the Philippines, the Commonwealth of the Northern Marianas, the Federated States of Micronesia, the Republic of Belau, the Republic of the Marshalls, Korea, Japan, and China. Guam measures 30 miles long and 4 to 9 miles wide for a total area of 212 square miles. It is 1,550 miles south of Japan, 1,500 miles east of the Philippines, and about 3,300 miles west of Hawaii.

## School-Based Suicide Prevention Programs in the United States

There are generally two levels of school-based suicide prevention programs: (a) primary and (b) secondary (Miller & DuPaul, 1996). Primary prevention programs aim to deter problems from occurring in individuals and to encourage them to constructively deal with life (Berkan, 1986; Hightower, Johnson, & Haffey as cited in Miller, & DuPaul, 1996). The intent of secondary prevention

programs is to identify problems at their initial stage in order to shorten the duration of the problems and lessen their intensity (Hightower et al., as cited in Miller & DuPaul, 1996).

The most prevalent approach to the primary prevention of adolescent suicide programs are curriculum-based. Of these curriculum-based programs, the leading method is talking directly to students and teachers about adolescent suicide (Garland & Zigler, 1993). A less frequent approach are curriculum-based programs geared to foster general coping skills such as decision making, developing positive self-image, and the like (Miller & DuPaul, 1996). Included in the primary prevention programs are in-service training for school staff (Garland & Zigler, 1993; Miller & DuPaul, 1996). This is in contrast with the suicide prevention program of Madison, WI which considers educating staff, parents, and students to the warning signs of potential adolescent suicide as secondary prevention since this addresses an existing problem aiming to prevent a more serious one, that of suicide (Berkan, 1986).

Secondary adolescent suicide prevention programs, or interventions, generally rely on student self-referral, peer referral, or staff referral of suicidal ideations or actual suicide attempts. According to Miller and DuPaul (1996), if the intent of a secondary prevention program is to defuse already existing problematic conditions, then these types of programs should include some type of screening approach to identify adolescents potentially at risk for suicide. Miller and DuPaul suggest initially using the Suicidal Ideation Questionnaire (SIQ; Reynolds, 1988). Those students identified to be at risk for suicide would then be individually administered a structured clinical interview using the Suicidal Behaviors Interview (SBI; Reynolds, 1992).

#### Components Of School-Based Adolescent Suicide Prevention Programs

Malley, Kush, & Bogo (1994) list the following 16 components of a comprehensive and systematic school-based adolescent suicide prevention program: (a-b) written formal suicide policy statement and procedures to address at-risk students; (c) staff in-service training; (d-e) mental-health professional on site and a mental health team; (f-g) prevention materials for distribution to parents and students; (h) psychological screening programs to identify at-risk students; (i) prevention classroom discussions; (j) mental health counseling for at-risk students; (k) suicide-reference materials for counselors; (l) suicide prevention and intervention training for school counselors; (m) faculty training in detection of suicide warning signs; (n) post intervention component in the event of an actual suicide; (o) specific written criteria for counselors to assess the lethality of a potential suicide; and (p) written policy describing the evaluation procedure for the school-based adolescent suicide prevention and intervention program. In addition to the above components, Miller and DuPaul (1996) add the following: Secure lethal weapons to deter adolescents in using them to harm themselves; educate the media not to sensationalize suicides; use a competency-based model for prevention; and obtain the support of administrations, teachers, and parents.

#### School-Based Suicide Prevention Program Effectiveness

There are several recommendations for an effective school-based suicide prevention program. One program component is the inclusion of both primary and secondary prevention procedures (Garfinkel, 1989; Garland & Zigler, 1993; Guetzloe, 1991; Miller & DuPaul, 1996). A second component is the teaching of life skills to resist negative social influences; preventing particular problems and conditions; focusing on the social and emotional issues of adolescents; and sharing with them successful coping mechanisms (Berkan, 1986; Dept. of Student Services and Special Education,



1987; Kalafat & Elias, 1995; Miller & DuPaul, 1996). A third component is to create a culturally compatible, school-based life skills curriculum for the prevention of adolescent suicide. LaFromboise and Howard-Pitney (1995) developed a school-based life skills curriculum for the prevention of American Indian adolescent suicide, in particular for the Zuni tribe. They combined a social cognitive, life skills approach with peer helping and found this approach effective in reducing risk factors associated with suicide. A fourth component found to be effective is to target at suicide-risk adolescents, rather than targeting all the adolescents in the school, and providing them a comprehensive, school-based suicide prevention program (Eggert, Thompson, Herting, & Nicholas, 1995). Part of this school-based prevention program is the incorporation of an in-depth assessment of each adolescent's suicide potential using the Measure of Adolescent Potential for Suicide (MAPS: Eggert, Thompson, & Herting, 1994), a two hour interview conducted by a trained counselor or nurse.

### School-Based Suicide Intervention Program in Guam

The Guam public schools have some of the same suicide prevention components in their intervention program as that of the United States. These components are delineated in the Student Procedural Assistance Manual (SPAM: Student Support Services, 1996). The SPAM contains a written formal suicide intervention policy statement and procedures addressing at-risk students and gives specific instructions dealing with suicide cases. Notable is the fact that the school counselor takes action informing parents or guardians immediately of suicide ideations or suicide attempts. The counselor documents each step from the time that the suicide ideation or suicide attempt is known, to the referral and notification of parents or guardians. At no time is the adolescent left alone during a suicide crisis. Follow-up after the adolescent returns to school is part of the procedure. Upon return to the school, specific appointment dates and times are set for the adolescent to see the school counselor. Guam's suicide intervention program also includes staff in-service training; mental health counseling for at-risk students; and a post intervention component in the event of an actual suicide.

### Recommendations for a School-Based Suicide Prevention Program for Guam

It is recommended that Guam augments its suicide intervention program by including primary prevention components. One such suicide prevention program to consider is the Zuni Life Skills Development Curriculum (ZLSD: LaFromboise & Howard-Pitney, 1995). The ZLSD Curriculum combines a social cognitive, life skills approach with peer approach. The Zuni culture may be similar to the Guam culture which fosters interrelations and group cohesiveness. It is further recommended that the Guam public schools include in their SPAM (Student Support Services, 1996) some type of assessment to identify adolescents potentially at risk for suicide. This assessment could be the Suicidal Ideation Questionnaire (Miller & DuPaul, 1996; Reynolds, 1988) or the Measure of Adolescent Potential for Suicide (Eggert, Thompson, & Herting, 1994; Eggert, Thompson, Herting, & Nicholas, 1995). The program components listed by Malley, Kush, and Bogo (1994) and Miller and DuPaul (1996) are useful in considering a comprehensive school-based adolescent suicide prevention program for Guam. In addition, since Guam's Department of Education has adopted a Competency-based Guidance and Counseling Model (1995), the schools can use this model for suicide prevention (Miller & DuPaul, 1996).



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## **“ BEING A DECENT HUMAN BEING IS A MODERN WAY TO BE A WARRIOR”**

Larry Anderson, Navajo Elder

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### **Introduction**

The counseling needs of Navajo children and families have changed during the last twenty-five years as the Navajo Nation has undergone rapid assimilation and modernization. Many of these needs are similar to the counseling needs in other indigenous cultures, developing nations, the newly democratized “Eastern Block”, as well as industrialized nations and the modern West.

An adolescent sub-culture with “at risk” behaviors is epidemic world wide. The accompanying dramatic changes in the culture, language, and family structure of most nations are seen as resulting in part from the introduction of satellite TV, videos, Heavy Metal Music, and other media. Modern Western countries have not solved these problems. There are increasing needs resulting from poverty, substance abuse, domestic violence, child abuse and neglect, gang activity, teenage suicide, discrimination and etc.

During the past twenty-five years there have been dramatic rapid changes on the Navajo Reservation which mirror this global trend. There is an extreme need for services with very limited resources.

We are all in this together. Our children are the holders of the future for us all. We need to network globally for solutions. When respect for culture, self, others, and life itself is lost, how is it reclaimed?

For the Navajo, the establishment of Medicine Man Apprenticeship Programs by the Navajo Nation is part of the recognized need to return to traditional cultural values and spiritual practices.

A Multicultural spiritual perspective can provide part of the way back/out/forward. This approach can be utilized worldwide.

### **Transpersonal Psychology**

#### **1. Abraham Maslow's Hierarchy of Needs**

Abraham Maslow is known for his hierarchy of needs pyramid. Safety and food and shelter are at the base of the pyramid, belonging and self esteem in the middle, and self actualization at the top. No one argues with this paradigm of what we need to become who we can be.

Poverty, substance abuse, family violence, high crime rates, and discrimination all interfere with these basic needs being met and therefore prevent self actualization . Self actualization implies the realization of

potential across a broad spectrum, physical and emotional health, education, relationships, and occupation throughout the life span of an individual.

## 2. The Transcending Self Actualizer

What is not commonly known is the Maslow's pyramid was not topped by self actualization. There is another layer. This final layer is strangely censored in the mainstream universities of the modern West. Maslow's hierarchy ends with Transcendence. Transcendence is just above self actualization. Maslow's last book was entitled "The Farther Reaches of Human Nature". Transcendence means an individual's experience of "oneness" with the creator and creation. Maslow's list of the traits that typify the transcending self actualizer are a list of the traits that would also describe the typical traditional Navajo Person as well as other indigenous peoples. Maslow does not say this and so I must assume he did not realize this.

## 3. The Association For Transpersonal Psychology

Maslow was a founder of the Association for Transpersonal Psychology, ATP, in 1971. His definition of Transpersonal Psychology was, "beyond the personality and having to do with the wisdom of the soul". Transpersonal Psychology is often called the fourth force in psychology. The third force being Humanistic psychology preceded by behavioral psychology as the first force and cognitive psychology as the second force.

The field of Transpersonal Psychology has rediscovered what indigenous peoples and many Eastern cultures and others have always know. First of all, we are all spiritual beings and this dimension of ourselves must be addressed to realize our true potential. The spiritual aspect of a person must be treated to intervene effectively when things have gone wrong or when we need extra support.

There has been an international association for Transpersonal Psychology for over ten years and Transpersonal Psychology has become a recognized subdivision of The American Psychological Association, APA. There are several institutions of higher education in the United States where a graduate degree in psychology with a transpersonal emphasis is offered.

## 4. Transpersonal Psychology Is A Methodology For a Multicultural Spiritual Approach To Many Of Today's Counseling Needs

Transpersonal Psychology shares core experiences and understandings with many Eastern religions and many indigenous spiritual belief and healing systems. With this newest "force" in psychology, we in the modern scientific West are discovering and embracing what we have ignored or dismissed in other cultures. This is an interesting development in psychology, one that merits serious contemplation. It is equally interesting that if we trace our spiritual traditions back far enough, no matter what culture we are from, we arrive at a similar place. This place has an accepted norm of individuals having a direct experience of "oneness" with the Creator and creation.

The field of Transpersonal Psychology is both eclectic and ecumenical, recognizing the spiritual dimension of our being and our world and the need to treat this part of ourselves along with our mental, emotional, and behavioral selves in an integrated way. This a "given in the Navajo spiritual belief and healing system and the understood purpose of ceremonies and prayers.

Joseph Campbell is perhaps the most famous person of recent times to bring to popular attention that there is a universal experience of "oneness" that is expressed globally in culture specific myths and rituals.

It is not commonly known in Western psychology that Carl Jung broke with Sigmond Freud over what he called, "the suppression of the sublime".

The "Energy Body", upon which the more than five thousand year old Eastern practice of acupuncture is based, simply does not exist in modern Western medicine. The energy body also does not exist in the modern Western paradigm of who we are as human beings. Yet when a Navajo medicine man works to bring any life problem or situation into harmony/balance for an individual, he will work with this unseen dimension moving along and slightly above the body of the patient/client with the exact same movements that would restore the proper flow of the energy body in the meridians known in acupuncture. There are very simple and short exercises which can demonstrate the existence of the energy body. The practice of Karate incorporates this knowledge. Nurses are being trained in "therapeutic touch" and work with the energy body of patients.

AA and other twelve step programs for addictions of all kinds could be classified as transpersonal interventions. The spiritual aspect of these programs is believed to be what is responsible for their success. Twelve step programs are international and easily adapted in various cultural settings.

## 5. Some Methods And Tools From Transpersonal Psychology

Progoff Intensive Journal Work

Dream Work

Meditation /Relaxation Therapy/Breathing

Affirmations

Simple Rituals

Prayer

Energy Body Exercises/Therapeutic Touch

Being With Nature/The Earth-Earth Prayers

These types of practices/interventions can facilitate our being connected to our inner and outer selves and to the Creator and creation. Thus we can have a sense of worth, a sense of belonging, and a sense of safety no matter what our external realities.

This does not replace conventional counseling or cure social problems. Transpersonal methods of intervention work best when integrated with other modalities.

For eclectic Counselors there is the belief that if a client's thinking changes then the client's feelings and behavior will follow. Also, if the client's behavior changes then the client's feelings and thinking will follow. In addition, if the client's feelings change then the client's thinking and behavior will follow. When using various methods to change all of these at once, you usually get the quickest and most dramatic results. For the counselor also using transpersonal methods, the client's spiritual reality would be added as a dimension of the person and a place of intervention. Therefore, when a client's spiritual reality changes then the client's thinking, feeling, and behavior also change etc.

## 6. "Being A Decent Human Being Is A Modern Way To Be A Warrior"

Larry Anderson, Navajo Elder

A few years ago, Larry Anderson was asked to speak to the students of our middle school when an Anglo teacher-wrestling coach had died overnight in a car wreck. Part of what he said was, "Being a decent human being is a modern way to be a warrior. Joe Droll was a decent human being." This statement has stayed in my mind, both as a personal motto and as an image and value to incorporate into my counseling work with Navajo students.

Somehow decency is a good word for what more and more needs to be achieved or reclaimed in our lives, in society, and in our work as counselors. We cannot wait on social policy and economic solutions etc. We can learn more about violence, resilient children, PTSD, dysfunctional family dynamics, and addiction, etc. We can remember to focus on the client in front of us when we feel overwhelmed by what is happening in our communities and society at large. We can stay focused on the process instead of the results in order to prevent burn out. I believe that it is also helpful to us as well as our clients to have a larger view with a spiritual base and some kind of compass for where we want to go and how to get there.

## Conclusion

Transpersonal psychology can provide both multicultural and even culture free methods and practices to support us and our clients on our journey to a better future where respect for culture, self, others, and life itself is something that is not being severely eroded.

We need to recreate a world where students are not afraid to come to school because they are afraid of each other and where adults are not afraid of young people. This means a world where violence is drastically decreased.

Right now, it appears that we need to consciously and deliberately foster self actualization in the midst of adversity. Transpersonal psychology is one tool for accomplishing this.

Note:

Relevant Handouts Will Be Provided

Brief Experiential Exercises/Demonstrations will be included.

# Online Support Groups and the Internet:

## Global Linkages of Emotional Support

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Traditionally, people discuss issues of loneliness, bereavement and emotional distress in person with someone they know. However, current computer technology enables people worldwide to discuss personal issues as well as exchange information, resources and services with each other through the Internet from the comfort of their homes with strangers. The availability of reasonable-priced computers, modems and access to the Internet has resulted in the accessibility of a wide variety of "cyber" mental health services including online support groups (OSGs). Currently, research on the efficacy of "cyber" mental health services is limited. However, preliminary research specific to OSGs is suggestive of positive outcomes. We discuss online support groups (OSGs) with emphasis on their function, advantages, limitations and ethical issues. It is assumed that the reader possesses basic computer skills and terminology but may be unfamiliar with online support groups and their role within the mental health community.

### Support Groups

Traditional face-to-face support groups encourage members to express concerns, emotions and ideas; offer advice and support; ask questions; and share information in a confidential setting. Research on the efficacy of traditional support groups indicates that members benefit in the following ways: (1) learn about common aspects of their problem from other members, usually through information sharing; (2) experience shared understanding and strong group acceptance; (3) learn to re-attribute the cause of their problem from a personal failure to an impersonal issue; and (4) develop a sense of normalization as others disclose similar reactions (Hurley, 1988; Mehr, 1998). While traditional support groups are effective in assisting many people in coping with feelings and improving coping strategies, these groups have obstacles that limit their efficacy for others. They require the following: that everyone convene at the same time which can be



**inconvenient; that transportation arrangements be made; that issues of cultural stigmatization be resolved so as not to interrupt attendance; that membership fees be paid which may be prohibitive; that members self-disclose to strangers; that issues of social status that may intimidate some individuals be eliminated; that obstacles caused by being housebound due to physical, medical or caregiver limitations be overcome; or that services be made available in the member's geographic location. While face-to-face support groups help many, they are not a panacea for all.**

### **Online Support**

**Online support groups (OSG) are a relatively new and growing cyber service. Like traditional support groups, OSGs are founded primarily on a western orientation of self-disclosure of personal problems, self-help and supporting others. OSGs can serve as part of a comprehensive program of mental health services or can serve as an individual's sole support (Davidson & Jackson, 1997). They offer many features of traditional self-help and support groups (Weinberg et al., 1996) but do so using virtual communities in which people participate in discussion groups on such topics as physical abuse, trauma, HIV and depression, among others.**

OSGs can function in two formats: (1) in "real time" or (2) through postings onto a public message board. Real time OSGs are interactive, lively and casual "discussions" with others. They meet at a specific, pre-scheduled time and place on the Internet (i.e., chat room) and participants receive immediate feedback, support, advice and/or information. They correspond anonymously using contrived screen names (i.e., pseudonyms) while engaging in text-based conversation. They take turns communicating with each other in a manner similar to a face-to-face support group. In spite of the lack of physical interaction and the lack of non-verbal communication among participants in OSGs, limited expressions of emotions are conveyed symbolically, visually and in shorthand. Most real time OSGs are facilitated by a host/community leader to ensure that communication remains focused on the topic and to ensure that group norms are observed, following basic ground rules: (1) remain anonymous, (2) take turns, (3) remain focused on the topic, (4) no harassment (e.g., personal criticism, cursing or name-calling) and (5) maintain confidentiality.

In the message board type of OSG, participants' postings can be made to a specific individual or to the entire group 24 hours a day. This format allows participants to send or retrieve messages at their convenience, regardless of time zone, but responses are delayed as one waits for a response from others.

OSGs are sponsored by Internet Service Providers (ISPs) such as Prodigy, America-on-Line (AOL) and CompuServe that offer OSGs and other services to entice customers. OSGs can also be accessed through privately owned web sites such as [www.Death&Dying.com](http://www.Death&Dying.com). Each ISP or web site sets its own standards regarding training of hosts, crisis management, regulations, disclaimers and procedures.

### **Cultural Considerations**

**As computer, transportation and electronic technology connect nations and remote regions, the world increasingly becomes one world (a "global village") instead of many worlds (Cogan, 1996). Furthermore, the global village highlights the fact that the cultural perspective and value system espoused in European-American/North American society is just one of many (Mehr, 1998). In the global village, events that were once considered local**



dramas become significant worldwide. Instant and extensive news coverage of events such as bombings in Omagh, Northern Ireland and at the American embassies in Kenya and Tanzania; the death of Princess Diana; natural disasters such as the fatal tidal waves in Papua New Guinea; and stock market devaluations in Asia demonstrate this point. These traumatic events produce a range of emotional reactions such as anger, anxiety, depression and fear, among others, in people worldwide based on their cultural perspective and this, in turn, will affect the type of support that they seek from OSGs. For example, people worldwide accessed grief OSGs such as "Gentle Passings" to mourn Princess Diana's death by expressing their emotional distress, seeking comfort and/or sharing information (Remolino, 1998).

People bring culturally-based life experiences and coping mechanisms that influence their ability to understand, cope and effectively utilize social, health and educational systems and OSGs. Issues that are influenced by one's cultural background include attitudes toward the following: pregnancy, violence, sexually transmitted diseases (STDs), suicide, abortion, the value of male versus female children, birth spacing, death, contraceptives, breast feeding, division of labor based on gender, individual versus collective responsibility, marriage between minors (e.g., pre-teens) and adults, arranged marriages and stress, among others. Moreover, issues of internal versus external locus of control and locus of power, fear of being perceived as a failure and value of the family and/or community support network have cultural implications. As OSG participants support each other globally, they will learn about diverse cultural perspectives from each other. This can promote creative problem solving within one's own cultural perspective (Cogan, 1996).

OSG participants from non-western countries may differ from their national peers in their understanding of and ability to use non-traditional and non-culturally-based methods of acquiring information and support, such as OSGs. They must speak and understand English sufficiently to participate in OSGs sponsored in North America. Further, they must be skilled in self-expression and the verbal support of others without the aid of non-verbal cues (Cogan, 1996; Mehr, 1998). Participants and the host should routinely clarify words and statements for each other in order to maintain accurate and open communication because written expression is the sole means of communication in OSGs. Precise communication reduces cultural and communication barriers (Mehr, 1998).

Hosts who have gained knowledge and awareness about various cultural systems are more likely to be effective in a global village and should function as a "culture broker." As culture brokers, they can educate ethnocentric participants and promote cultural diversity within the OSG (Brill, 1995; Gladding, 1997). Further, hosts must be aware of the relevance and appropriate use of indigenous support systems and should inquire about traditional cultural helpers. As a point of clarification, physicians are frequently consulted in Asian communities as cultural healers because it is culturally acceptable to be physically ill, even if the illness results from the person suppressing and denying distressing emotional reactions (Mehr, 1998). Thus, Asians may initially join an OSG under the guise of discussing medical issues rather than seeking emotional support.

Co-hosting by two culturally sensitive hosts may be one solution to ensure that cultural subtleties are attended to while group needs are also met. Hosts must transcend communication and cultural barriers in order to be effective across cultures and maintain open relationships. Their ability to "read" the situation and "read" participants will

contribute to the efficacy of OSGs with participants from diverse cultures (Brill, 1995). Cultural sensitivity does not require becoming familiar with *all* cultural rituals, values, resources or perceptions worldwide; this would be an impossible task. It *does* require that hosts and participants be open to other forms of support and coping styles that are a stretch beyond one's current level of cultural awareness.

### **Brief Discussion of the Advantages of the Online Support Group**

*Cyberconnections/Increased Access to Support.* OSGs bring support and camaraderie to people for many reasons and in different ways. They reduce the sense of isolation for those who reside in remote or sequestered locations, inaccessible locations or underserved locations, or for those who are housebound (Finn, 1996; Sampson et al., 1997; Sussman, 1998; Weinberg et al., 1996). Furthermore, issues of transportation and distance are eliminated as the participant can join an OSG from home and can join a "real time" OSG that meets at a convenient time based on *the participant's* time zone (Sussman, 1998; Weinberg et al., 1996).

*Specialized OSGs.* Since OSGs are not limited by geographic boundaries, OSGs dedicated to specialized topics, age groups or gender groups can be formed successfully from a global population. Furthermore, some OSGs may need to be age-specific and/or gender-specific in order to accommodate cultural mores. Consider that teens may benefit from age-specific OSGs to discuss contraceptive use or arranged marriages; and female only OSGs may support women concerned about sexual or physical abuse or suicide. Such topics are taboo in some cultures, but the privacy and anonymity of cyberspace may reduce inhibitions and feelings of isolation. Most importantly, people need *someone* with whom they can communicate honestly and openly, thereby increasing their ability to improve their lives.

*Universality as a Curative Factor.* Others struggle too. Universality unites people as they share similar thoughts, feelings, fears and/or reactions with their virtual community (Yalom, 1995). As people share and support others, they realize that distress is a part of life, they feel validated and they heal as they learn to cope from others.

*Privacy.* OSGs give participants the privacy to seek support and information that might be perceived as a stigma to others and thereby become a barrier to obtaining services and/or information. Further, one's social status in the community might be jeopardized and thus inhibit in-person participation in a support group or other culturally accepted support system. From the privacy of one's home, one can overcome these barriers and be informed, supported and self-disclosing yet not fear ridicule, cultural stigmatization or vulnerability (Nickelson, 1997; Sussman, 1998).

### **Brief Discussion of the Limitations of Online Support Groups**

*Limited Feedback.* Sampson et al. (1997) and Sussman (1998) observe that OSGs enable participants to "hide" emotionally and interpersonally behind computer screens. The absence of face-to-face contact reduces verbal and non-verbal feedback and vocal intonations. To partially compensate for the interpersonal limitations, participants use text-based shorthand that often transcends cultural barriers to convey certain emotions.

**Although a participant may initially feel uncomfortable with limited feedback, such inhibitions may, in time, be overcome. Those with interpersonal difficulties or cultural barriers may perceive limited feedback as an incentive to participate because they do not feel pressured to take personal and interpersonal risks as they might in face-to-face support groups. The initial ability to "hide" feelings behind a computer may increase their self-**

**esteem and eventually increase their desire to self-disclose, help themselves and support others.**

*Confidentiality.* Steps are taken to maintain the confidentiality and anonymity of each OSG participant as well as the content of group dialogue. Participants use pseudonyms to maintain anonymity and the host discourages the exchange of personal information. In spite of OSG security features, confidentiality can be compromised and discussions may be intercepted (Davidson & Jackson, 1997; Sampson et al., 1997; Sussman, 1998). Participants must consider the risks of a breach in confidentiality before joining an OSG.

*Stages of Group Development.* OSGs are open continuously to new membership. This membership flux, often occurring in face-to-face support groups as well, makes it difficult for OSGs to maintain the working stage of group development for extended periods (Corey & Corey, 1997). This limitation reduces the efficacy of OSGs as a sole support source and warrants OSGs being one component of a larger culturally relevant support system.

*Crisis Management.* The successful resolution of an emotional crisis in cyberspace is a challenge. The following situations contribute to a crisis: participants' diverse geographic locations around the world; premature disconnection at a crucial moment or when a sensitive issue is raised; personal emotional baggage that tends to reduce resiliency (e.g., previous psychiatric hospitalizations); reluctance to fully self-disclose information relevant to the crisis; and lack of verbal and non-verbal cues (Sampson et al., 1997; Sussman, 1998). OSGs are not appropriate for everyone and are not a panacea. Some participants may need additional medical, mental health and/or educational services to resolve distressing situations. Issues of limited feedback further complicate the assessment and referral process, making a referral difficult and awkward, especially when the host is unfamiliar with services available in the participant's country.

*Ethical and Legal Concerns.* Professional qualifications and training of OSG hosts are important considerations in order to reduce the potential for incompetence in computer/technical and group facilitation skills (Sampson et al., 1997). Training of hosts should be comprehensive, address cultural sensitivity and incorporate current technology to ensure confidentiality.

At the larger level, cyberspace mental health services, including OSGs, raise ethical and/or legal concerns because jurisdiction is unclear and confusing because they function without regard to geographic borders or local or national laws (Lee, 1998; Nickelson, 1997; Sampson et al., 1997; Sussman, 1998). Several mental health organizations in the United States have begun to grapple with this ambiguity (Lee, 1998; NBCC, 1998). Future revisions of laws and ethical standards to include cyberspace mental health services will require an international perspective regarding educational standards and training; inclusion of all mental health disciplines; and a need for special attention to enforcement issues (Lee, 1998; Nickelson, 1997).

## **Conclusion**

OSGs provide an alternative to traditional support groups by linking people with similar issues who seek support, even if support is not available in their local community (Finn, 1996). Furthermore, OSGs can reduce the sense of isolation and increase feelings of validation caused by geographic constraints or by discussing culturally stigmatized subjects.

Preliminary research on the efficacy of OSGs suggests positive outcomes but potential liabilities should also be investigated (Finn, 1996; Sampson et al., 1997; Sussman, 1998). Researchers should identify and reduce hazards to providing effective online support as well as

incorporate computer technology such as video conferencing, voice recognition, and voice activated commands, that maximize helping skills in cyberspace (Finn, 1996). OSGs will grow in sophistication as research and technology guide the way. As they become better understood, more accepted by the mental health field and more culturally acceptable, they may become legitimate referrals for support.

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# **COUNSELORS AS THE FOUNDATION OF GLOBAL CHANGE**

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## **ABSTRACT**

*This paper is the result of a qualitative research project based on a needs assessment of counselor training as well as a review of relevant literature. The author presents a STAR\* Model with four approaches to form the crux of a re-envisioned counselor education graduate program. The determined goals for changes in counselor preparation are delineated under the four approaches—curriculum enhancement, professional development school, international professional development and cyberspace—which are discussed in detail. The goals are to better train counselors so they have a firm foundation to develop diversity awareness and responsibility through a transformed world view. This attitude leads to acceptance of the richness of global differences which can provide an expanded perspective for solving problems, engaging in creative projects, reaping the benefits of collaboration and research, and implementing global change.*

## **INTRODUCTION**

Global changes are instantaneously viewed and read about in the mainstream and tabloid press. People the world over watched hours of television depicting the lives and deaths of Mother Teresa and Diana, Princess of Wales. Were they just events or have people self-evaluated and vowed to be more compassionate, giving, and loving in their personal and professional lives because of the examples of these models? Fires, earthquakes, hurricanes, volcanic eruptions, food scares, poverty, famine, terrorism, car, and plane crashes, violence — this is what many people see and hear on television the last 30 minutes of their day before they go to bed. People used to try to deal with their own calamities, now they live with the calamities of the world. Humans must learn to cope with and address the escalation of information and connectedness created by instant access to information, historical events, and predictions of future disasters.

According to Peter Russell it is time for individuals to learn to “be better able to cope with the pressures of accelerating change without burning out, better able to relate to and communicate in an increasingly complex world, and better able to summon the inner resources to guide themselves through what may well be the most turbulent times in human history.” (p. xix in Kopelman, 1996). Therefore, educators must continue to challenge graduate students to master their minds in order to contribute to the global brain while at the same time nurturing individuals to expand their global heart.

## **COUNSELORS AS THE FOUNDATION OF GLOBAL CHANGE**

Lee and Sirch (1994) suggested that counselors are the vital key to facilitating this needed flexibility and management of the technologically laden new millennium and empowering individuals to view social responsibility through a transformed world view. The purpose of this article is to provide information gleaned from a review of literature and a qualitative research study dealing with the changing roles of counselors and to make suggestions for re-envisioning their graduate education to meet the needs of communities in the Southeast Missouri State University service area. The goals are to better train counselors



to develop diversity awareness, to adopt the attitudes that all are capable, and to gain the skills to close the achievement gap between the haves and have nots. This attitude leads to acceptance of the richness of global differences which can provide an expanded perspective for solving problems, engaging in creative projects, and reaping the benefits of collaboration and research. Interestingly, expanding awareness and accepting others helps individuals with their own level of self-acceptance. This is an ever expanding cycle.

## **RESEARCH CONDUCTED**

Relevant literature was reviewed and a qualitative research project was undertaken in the summer of 1997 in a Counseling Foundations course at Southeast Missouri State University. Graduate students and the author were interested in assessing the perceived needs for changes in counselor training. Needs assessment questions were asked with the main emphasis on the following. What is the counselor education program doing now that works? What in the counselor education training program needs modifying? What in the counselor education program needs more emphasis? Concerned citizens such as elementary and secondary students, parents, school counselors, community service providers, school board members, principals, teachers, and superintendents provided the answers to these questions. The results from the needs assessment and the review of literature were compiled and those dealing with future goals and changes for increased information and training are listed below. Some issues are already addressed but need more emphasis or new teaching methods to enrich the learning experience. Each assessed need is delineated under one of four proposed counselor training approaches which will be explained in further detail following the list. A Roman numeral identifies each approach and may appear after a goal when more than one approach is used.

### **I. Curriculum Enhancement**

- Program Evaluation (II)

- Play Therapy

- Social and Cultural Aspects of Counseling

- Family Systems - pertaining to education.

- Grant Writing

- Ethical Considerations (II, III, and IV)

- Legislation - learning to be active change agents and child advocates, establishing effective government relationships

### **II. Professional Development School**

- Consultation and Facilitation

- Leadership and Managerial Skills - marketing, "selling" the program, public relations training, and competent and effective leadership (I)

- Play Therapy - in the school climate, understanding various learning and expressive styles. (I)

- Time Management - building a balanced program and making real world choices

- Collaboration and Involvement - incorporating the concerned community members with the entire school (teachers, administrators, secretaries and other staff, students and counselors)

- Classroom Management Skills - as pertains to counselors teaching

- Comprehensive Guidance Classes (I)

- Peaceful Conflict Resolution (III)

Dropout Prevention  
Relationship Skills (III)  
An Understanding of Various Approaches to Facilitate Individual Learning Styles (I)

### **III. International Professional Development**

Prejudice Prevention (II)  
Multicultural Competencies (II)  
Crisis Intervention (II)  
Research (IV)

### **IV. Cyberspace**

Technology - knowledge of use and abuse and practical applications (I, II, and III)  
Networking with other professionals  
Follow-Up  
Continuing Education

## **GOAL ATTAINMENT**

After generating this list of potential needs for increased information, training and achievement, students emphasized the desire to obtain this information without the commitment of additional time away from family and work. Thus the addition of more graduate credit hours was not an option to meet these goals. The author suggests using a STAR\* Model (\*Student Training and Achievement Re-envisioned) to re-envision graduate education that will begin to encompass needed changes while not taking away more precious time from students. As can be seen from figure 1, the top of the star represents graduate students. The other four points of the star depict the approaches suggested to meet community and global needs. The first approach is to recreate a counselor education curriculum enhanced to meet future needs and goals.

## **STAR MODEL**

### **I. CURRICULUM ENHANCEMENT**

The graduate counselor education program curriculum will emphasize an updated version of the Missouri Comprehensive Guidance Program. In their book *Developing and Managing Your School Guidance Program*, Gysbers and Henderson (1994) explained the four delivery systems used in the comprehensive program. Counselors will be taught to divide their time between guidance curriculum, individual planning, responsive services, and system support. In addition, accountability must be addressed through the use of evaluation of program effectiveness.

In an endeavor to keep the current master's degree hour requirements, most of the goals will be interspersed into the present syllabi and systematically taught in the proper sequence. However, some goals need additional enhancement. In order to incorporate global awareness and understanding, a course in Social and Cultural Aspects in counseling will be required. This will be made possible by removing an existing



course in intelligence testing. The testing course will be made available in the post master's program along with other classes leading to School Psychological Testing Certification. Play therapy and Family Systems will be available by selecting these courses for electives. Information and skills will also be learned from the second approach which proposes to create a Professional Development School.

## **II. PROFESSIONAL DEVELOPMENT SCHOOL**

The primary goal of counseling in the schools is to help individuals increase their level of responsibility, confidence, and competence in the classroom and throughout life. One way in which to achieve this goal is through the use of the developmental guidance and counseling approach which is used to train graduate student counselors. Counselors using this approach prepare their students for a rewarding future as "productive citizens who have a global consciousness" (Myrick, 1997, p. 8). To enhance this consciousness the author of this paper stresses that educators must espouse the idea that the entire educational community needs to become aware of the connectedness of educational issues locally and globally and then to find action-oriented resolutions.

It is proposed that this connectedness can be accomplished through the development of a partnership between Southeast Missouri State University and a Professional Development School (PDS). A PDS is a facility where joint collaborative relationships are formed in order to provide educational opportunities to practitioners in the field and to those in higher education. This partnership allows professionals to create or invent new entities to determine best preparations and best practices for emerging professionals. This collaborative effort brings together all disciplines and services in a well-formed coalesce.

Graduate students in counseling are often isolated in their educational preparation and thereafter as professional counselors with isolationist role descriptions. Some of the graduate counseling classes would be taught in the PDS to encourage training, participation, leadership, and collaboration among the various publics from the educational community. In this way the isolation cycle will be broken and teachers, students, counselors, and administrators will be trained in classes together. In other classes the graduate counselor education students will be trained by parents, children, counselors, teachers, community mental health providers, and administrators to gain skills to meet the needs of these groups. The learning approach would emphasize real world projects and active participation. After graduate students learn with community members and learn to meet community needs, then they can expand to learn about international needs and concerns. The third approach of the STAR Model recommends international professional development.

## **III. INTERNATIONAL PROFESSIONAL DEVELOPMENT**

School counselors' roles are frequently misinterpreted, misunderstood, and misused (Mustaine & LaFountain, 1993). Global understanding and collaboration must be undertaken to facilitate a true picture of school counselors and to re-envision their education. Anderson and Reiter (1995) viewed the most important characteristic of an indispensable counselor as that of one who can build relationships and acquire needed resources. It is believed at our institution that another attribute of utmost importance is that of being able to network and understand how other individual's roles influence and combine with that of the counselor. The author proposes a unified global effort on the part of counselor educators to begin to build collaborative

networks, thus providing a collaborative educational experience for all involved.

University professors and graduate students must use the Internet and World Wide Web to connect with educators, administrators and counselors in other countries to brain storm solutions to problems. Everyone must work together to conduct international research and form linkages to gain a world view which will expand to the entire global community.

Hagarty (1997) suggested that worldwide collaboration between counselors using the Internet is just as easy as a stroke of the keyboard. Colleagues throughout the entire global village can e-mail each other, use listservs, or electronic bulletin boards to share experiences and problems, and then receive answers within moments.

School counselors in various countries have diverse problems and have to set priorities accordingly. For instance in Israel counselors must prepare students for military service and to cope with the possibility of terrorism and war. Therefore, crises intervention is a top skill of counselors. In Denmark, counselors must receive a master's in education and spend only six weeks in counselor training. They must teach part of their time and believe their relationship with students is closer than American counselors (Hagarty, 1997). According to Chiu (1996, p.130), "...people within every nation have serious mental and emotional disorder that often differ by type and by frequency, depending on the nation."

Courtland Lee, American Counseling Association President, was quoted in an article by Hagarty (1997) as saying, "Counseling as we know it doesn't exist in large parts of the world. One of the challenges is in parts of the world where it doesn't exist, is to find ways to introduce people into professional counseling." Hagarty (1997, p. 16), commented "Although there are many differences in the training and roles of counselors throughout the world, the foundation of what all counselors do, regardless of where they do it, is very much the same."

International professional development of counselors can be enhanced by technology but the exchange of professors, graduate students, and counselors is also imperative. So much can be gained by living, loving, and learning in other countries. International conference attendance and two-week exchanges are encouraged by the Southeast Missouri State University graduate program. The author looks forward to networking with international colleagues to enlarge these exchange opportunities. Anyone interested in conducting collaborative research or wishing to discuss professional international development may contact the author at [dskeltons@semovm.semo.edu](mailto:dskeltons@semovm.semo.edu). The fourth approach of re-envisioning graduate education is the use of cyberspace.

#### **IV. CYBERSPACE**

While technology has had a tremendous impact on society it has created both positive and negative effects. Counselors must be trained to help individuals and groups cope with the consequences of changes incurred by students who are now connected with tremendous amounts of information and diverse people across the globe. They are kept current on world events, however, some have become addicted to computers while other young people have been enticed to meet computer "friends" and later find they are not appropriate peers. Graduate education must address the uses and abuses of technology and incorporate the realization that along with "high tech" comes the need for "high touch." The combination of these

approaches is the only way in which counselors will be provided with the necessary tools in order to practice effective and ethical intervention.

Counselor educators are integrating technology such as Internet, World Wide Web and PowerPoint Presentations into these courses in order to enhance teaching. The students who participated in the needs assessment requested “follow-up” contact with professors after they graduate and are on the job. This can be accomplished in part through e-mail messages. In his column Counselors in Cyberspace, Sams (1997) suggested that Internet Continuing Education courses from e-mail to video conferences will be made available to save time for counselors to spend time with family. He predicted (p. 47) “. . . with the advent of more powerful chat programs, like ACA Live!, iChat and other JAVA-based chat, live interactive courses are just around the bend.” Saving time and accessibility are the major advantages of using electronic education.

Technology is essential, but there is also a need for educators to interact with students and nurture the human caring and connectedness that Mother Teresa and Diana modeled so well. Therefore, it is imperative that we connect on a spiritual and social level in order to enhance our values, skills, behaviors, and attitudes and develop an enriched society in which global consciousness is respected and promoted by all. The counselor education program is using distance learning to save time for students. However, this means less and less face to face interactions, making it necessary for the counselor educators to work to enhance the true connectedness potential that lies within, that of hand to hand and heart to heart.

## SUMMARY

It is evident that “technology and education are tools which are connecting the intellectual segments of our global societies” (Skelton and Maclin, 1996, p. 98). Obviously, this task will not be an easy one. However, Welch and McCarrol’s (1993) research suggested that this futuristic view of counselors’ roles will help when re-envisioning graduate education. They insist that goals such as providing counselors with the tools necessary to be a community resource specialist and a cooperative channel between needs and resources will bring about true realization of what the exact nature of counselors’ roles are and empower counselors to attain those goals. Now is the perfect time to re-envision the graduate education program to expand the ever enlarging local, global and self-awareness cycle. This will empower counselors to continue to lead as change agents and form the foundation of global change.

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# The Separation-Individuation Process and Culture: A Study on Taiwan's College Students

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## Abstract

Research indicates that the separation-individuation process of individuals are mediated by cultural factors of the society in which the individuals belong to. As the Chinese culture emphasizes collectivism rather than individualism of the western culture, it is believed that there are differences in the separation-individuation process of individuals between the two cultures. In this study, a questionnaire, including the Separation-Individuation Process Inventory (S-IPI), and the Chinese Lai's Personality Inventory, which can discriminate maladjusted college students from the well-adjusted ones, were administered to 487 Taiwan college students. Results indicate that in spite of the S-IPI mean score of the sample is higher than that of the American counterpart, most of the Taiwan subjects are well-adjusted to college life with no significant psychological or interpersonal problems. It is argued that the separation-individuation process of the Taiwan college students are mediated by the Chinese culture which has different value systems from the western culture. This might have an impact on the counseling process which involves Chinese clients.

The importance of the issue of separation-individuation (S-I) process, which was postulated systematically by Mahler, Rice, and Bergman (1975), is well-known in disciplines such as psychology, counseling, and human development. The S-I process is found to be related to adjustment to college (Holmbeck & Wandrei, 1993; Lapsley, Rice, & Shadid, 1989; Palladino Schultheiss & Blustein, 1994a), identity formation (Lopez, Watkins, Manus, & Hunton-Shoup, 1992; Palladino Schultheiss & Blustein, 1994b), career development (Blustein, Walbridge, Friedlander, & Palladino, 1991), personality characteristics (Shiah, Tam, & Chiang, 1998), and psychosocial rehabilitation (Schneider, 1992). On the other hand, difficulties encountered in the S-I process of patients with borderline personality disorder have often been discussed in the psychopathology and treatment of this disorder (DuBrul, 1989; Coonerty, 1986; McWilliams, 1979; Muller, 1992).

There are two commonly used inventories designed to study the S-I process: the Separation-Individuation Process Inventory (S-IPI) constructed by Christenson and Wilson (1985), and the Separation-Individuation Test of Adolescence (SITA) established by Levine, Green, and Millon (1986). The former (S-IPI) is a 39-item inventory and the discussion of its reliability and validity can be found in Christenson and Wilson (1985), and Dolan, Evans, and Norton (1992). The latter (SITA) is a 100-item inventory and the discussion of its psychometrics appears in Levine et al. (1986), McClanahan and Holmbeck (1992), Levine and Saintonge (1993), Levine (1994), Holmbeck and McClanahan (1994), and Kroger and Green (1994).

Some researchers (e.g., Li, 1992; Slote, 1992) pointed out that the Eastern countries, such as China, Japan, Korea, and Vietnam, have a kind of integrated culture under the Confucian influence and thus the family is the basis of the individual ego structure and self image. This is quite different from the Western countries, which emphasize individualism. Tang (1992) proposed that the S-I process reflects a cultural difference as does the dominance of relation formation as a defense found among Chinese. Shiah, Tam, and Chiang (1997) found out that Taiwan high-school students had higher S-IPI scores than that of the American sample. This study further investigates the relationship between S-I process and adjustment of college students in Taiwan and may shed light on the cultural difference of the S-I process of different samples.

## Method

### Subjects

The sample includes 487 (256 male, 221 female, 10 missing data) college students from the Chung Yuan Christian University and National Central University. Their ages range from 18.42 to 31.08 ( $M=20.79$ ,  $SD=1.69$ , 21 missing data).

### Instruments and Procedure

The subjects were administered a self-report questionnaire and the Lai's Personality Inventory (LPI). The questionnaire, which was a minor correction of the version used in Shiah, Tam, and Chiang's (1997) study, includes the 39-item S-IPI developed by Christenson and Wilson (1985), and a 9-item self-report assessing borderline personality symptoms according to Benjamin (1993). Two items checking for subject's honesty/lying are also included. The LPI has 130 items designed to measure the scores of 13 subscales (Lai, 1997). Five personality types from A to E can be discriminated according to the scores of the subscales and both type B and E are considered to be maladjusted in daily life.

In order to enhance the cooperation of the subjects, they were first told that they had to fill in a questionnaire on interpersonal relations. They were debriefed later on the purpose of this study when data collection was completed.

## Results

Regarding the reliability and validity of the S-IPI, the Cronbach's coefficient alpha of the S-IPI was 0.877, and the correlation of the scores of the S-IPI with the number of borderline personality symptoms are shown in Table 1.

Table1

Correlation of the scores of the S-IPI and the no. of borderline personality symptoms

	Total ( $N=487$ )	Male ( $n=256$ )	Female ( $n=221$ )
correlation	.4726***	.4552***	.4867***

\*\*\*  $p < .001$

The means and standard deviations of the S-IPI scores and the number of borderline personality symptoms are shown in Table 2. There are no significant differences between male and female subjects for both the scores.



Table 2

Means and standard deviations of the S-IPI scores and the no. of borderline personality symptoms

	Total (N=487)		Male (n=256)		Female (n=221)	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
S-IPI scores	167.09	39.89	169.15	39.89	166.17	39.89
no. of borderline personality symptoms	2.70	1.85	2.69 <sup>b</sup>	1.84	2.71 <sup>b</sup>	1.87

Note. <sup>a</sup> No significant difference between male and female subjects ( $t = .82, p > .05$ ).

<sup>b</sup> No significant difference between male and female subjects ( $t = -.16, p > .05$ ).

The means and standard deviations of the S-IPI scores and the no. of borderline personality symptoms of the subjects who endorsed 5 or more borderline personality symptoms (called the borderline symptoms group, in which the subjects might have the diagnosis of borderline personality disorder) are shown in Table 3. There are no significant differences between male and female subjects for both the scores.

Table 3

Means and standard deviations of the S-IPI scores and the no. of borderline personality symptoms of the borderline symptoms group

	Total (n=94)		Male (n=51)		Female (n=41)	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
S-IPI	193.45	39.03	193.59	39.03	194.85	39.03
no. of borderline personality symptoms	5.56	0.70	5.45 <sup>b</sup>	0.67	5.71 <sup>b</sup>	0.72

Note. <sup>a</sup> No significant difference between male and female subjects ( $t = -.15, p > .05$ ).

<sup>b</sup> No significant difference between male and female subjects ( $t = -1.77, p > .05$ ).

The classification of subjects into different personality types according to the scores of the LPI is shown in Table 4. The mean and standard deviation of the S-IPI scores of B and E types combined are 200.85 and 37.54 respectively (median = 205.50, skew = -.22).

Table 4  
Classification of subjects according to LPI

	Personality types						Total
	A	B	C	D	E	mixed	
<u>n</u>	2	20	68	0	20	377	487

The mean and standard deviation of the S-IPI scores of subjects who are either B or E personality types and are in the borderline symptoms group are shown in Table 5.

Table 5  
Mean and standard deviation of the S-IPI scores of subjects who are either B or E personality types and are in the borderline symptoms group

	<u>n= 20</u>	
	<u>M</u>	<u>SD</u>
S-IPI	207.65	6.68

#### Discussion

Results indicate that the reliability and validity of the Chinese version of the S-IPI are acceptable. Thus this instrument can be used to study the S-I process of the Taiwan population in future research.

Although the means of the S-IPI scores of Taiwan college students (male: 169.15, female: 166.17) are higher than that of the American counterpart (male: 150.18, female: 141.58, Allen & Stoltenberg, 1995), results indicated that the S-IPI cut-off score for possible cases with borderline personality disorder or maladjustment is very close to 190 suggested by Christenson and Wilson (1985). That is say, the proposition that there are more Taiwan college students with S-I problems than American college students is not supported. At least, the results of the LPI of this study do not suggest that the students with S-IPI scores under 190 are in general maladjusted. LPI was chosen to be used in this study because it is designed and constructed for the Chinese population in Taiwan and thus cultural bias may be avoided. As being mentioned above, there might be differences in the S-I process between Chinese and American cultures.

There were no gender differences found in the S-I process in this study. This is compatible with the sample of high-school students of the previous study conducted by the same authors (Shiah, Tam, & Chiang, 1997). Nevertheless, some researchers, such as Nelson (1996), Dien (1992), Allen and Stoltenberg (1995), McChrystal and Dolan (1994), argued against the gender equality of the S-I process. Future research is needed to clarify this issue.

One of the limitations of this study is the using of the LPI, which is basically a personality inventory, as a measure of adjustment. This is because all the Chinese versions of adjustment scales used in Taiwan are either translated from foreign instruments which need further research on their reliability and validity, or with out-of-date norms. As a result, LPI was chosen as an alternative because personality types B or E of LPI are considered to have maladjusted problems (Lai, 1997). Although the constructs of adjustment and personality are not the same, it is reasonable to infer that they are correlated to some extent. It is hoped that an instrument assessing adjustment will be



developed in the near future in Taiwan and thus this instrument could be utilized in the study of S-I process. Another limitation is the lack of measurements on the subjects' acculturation to both the Chinese and Western cultures.

Different researchers study S-I process from different points of view, such as through social-cognitive perspective (Mazon & Enright, 1988), family systems (Daniels, 1990; Gavazzi & Sabatelli, 1990; Palladino Schultheiss & Blustein, 1994b; Sabatelli & Mazon, 1985), and qualitative analysis of the S-I process (Chen, 1995). Future study may focus on the integration of all these perspectives .

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## **Understanding Worldviews: Global and Postmodern Perspectives**

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Over the past four decades, understanding worldviews of various cultures using the Kluckhohn and Strodtbeck's theoretical model has become the converging professional interests of anthropology, social psychology, counseling psychology, cultural psychology, counselor-education around the world. Worldview were postulated in the 60's as five value orientations which are universal human existential issues to which individuals from different cultural backgrounds may have different solutions. They are (a) Human Nature (evil, mixed, or good); (b) Person/Nature relations (subjugation to Nature, harmony with Nature, or Mastery over Nature); (c) Social relations (Lineal, Collateral, or Individual); (d) Time sense (Past, Present, or Future); and (e) Human Activity (Being, Being-in-Becoming, Doing). Ample theoretical speculations as well as research findings using worldview as cultural and psychological variables for cross-cultural comparisons are presented in the professional literature (e.g. Baldwin & Hopkins, 1990; Carter, 1990; Cheng, O'Leary, and Page, 1995; Cheng, 1995; Katz, 1985; Mau, 1993; Sodowsky, Maguire, Johnson, Ngumba & Kohles, 1994; Trimble, 1981; Yang, J. 1998; Yang, K.S. 1982;).

Many believe that worldviews are important variables based on which counseling theories, assessment and research, and the counseling processes are derived (e.g. Carter & Helms, 1987; Carter, 1990; Ibrahim, 1987; 1991; Ibrahim and Kahn, 1987; Ivey, Ivey, and Simek-Morgan, 1997; Sue, Ivey, and Pedersen, 1996; Sue & Sue, 1990; Trevino, 1996). While the Kluckhohn and Strodtbeck framework has made a significant contribution toward measuring cultural differences, it has limitations to studying within-group and between-group patterns of cultural similarities and differences (Carter, in Pedersen, 1994). From postmodernism's perspectives, worldview is the composite of personal constructs in relation to familial, societal and cultural contexts (Brotherton, 1991; Ellis, 1997; Ivey, Ivey, & Simek-Morgan, 1997; Pedersen, 1994; Rigazio-Digilio Ivey, & Locke, 1997). Such culture-specific emic approach of cultural understanding could mean reduction of cultural realities reflecting the limits of modernist reasoning (Pedersen, 1994;). In the present paper, the author reviews selected worldview studies in the past two decades and attempts to find valid information from inconsistent comparative data acquired via traditional scientific rationality. Discussions of issues, inferences, and alternatives follow.

### **Assessment of Worldview**

Presented in the following are selected instruments developed by various researchers in and outside of the United States in the past two decades to assess worldviews across cultures, all based on the five themes proposed in the Kluckhohn and Strodtbeck model.

The Scale to Assess World Views (SAWV; Ibrahim & Kahn, 1987). The SAWV is the most often used instrument to investigate value orientations. It is a 45-item, 5-point Likert-type scale with three subdivisions and 9 items in each of the five categories. It was reported to have split-half reliability coefficients of .95 and .96 (Ibrahim & Kahn, 1987); test-retest estimates ranged from .27 to

.82 with a stability index of .67 (Sodowsky et al. in Mau, 1993).

The Intercultural Values Inventory (Kohls, Carter, & Helms, in Carter, 1990)

This inventory has 10 items for each of the 15 subscales (3 subscales for each of the 5 categories) using yes-no format with the reported reliability coefficients ranged from .54 to .79.

The Value Orientation Scale (Chung in K.S. Yang, 1982)

The scale was originally in Korean but was later translated into Chinese with 45 life situations pertaining to the five categories each with 3 responses for the respondents to rank order. It was reported to have test-retest reliabilities between .62 and .86.

The Endeavoring Self and the Harmonizing Self Scales (Johnson in Kwan, et al., 1994)

Followed on Sodowsky & Taffe's suggestions to reduce the number of items and facets of the SAWV, Johnson reduced the 45-item SAWV to a 20-item, two-factor measure. The Endeavoring Self depicts cultural traits of being pragmatic, doing oriented, and trying to overcome obstacles. The Harmonizing Self depicts values of acceptance to self, others and nature as well as relationships. The two factors had an interscale correlation of .15 and coefficient alphas of .79 and .77.

Taiwanese World View Scale (J. Yang, 1998)

The TWVS was a 16- item Likert-type instrument developed by the author in her recent study, after failing to obtain a Chinese version of the SAWN. In the TWVS, each item represents one of the three subdivisions to the five categories with an additional subdivision of the human nature category: "neither good nor evil". With fair expert evaluations, the test-retest reliabilities of this scale ranged from .33 to .72.

### Inadequacies of Cross-Cultural Comparisons

According to Sodowsky, et al (1994) and Ibrahim (1987) the epistemology of worldviews could be extrapolated to practice. A practitioner who is sensitive to the clients' distinctive styles could facilitate dyadic communication. Assessing and understanding the worldviews are essential to ensure compatibility of values and life perspectives (affects, cognition and behaviors) of both the counselor and the client/group being counseled. Studies of worldviews of numerous cultural groups using the above instruments have yielded, however, rather inconsistent results among themselves and contradictory from the conventional speculations of cultural variations. Presented in Table 1 is a summary of worldview research findings of selected cultural groups.

Cultural differences exist not only in the individual level but also in the group (family, work, organization, religion, etc) and cultural levels (race, ethnicity, etc), group means of comparisons in the comparative studies are thus not sufficient to represent individual and cultural means. In our increasingly diverse era, variables accounting for individual differences are too many to study and cultural differences are very difficult to verify. In addition, values may not be constant over time due to individuals' acculturation in relation to a given cultural frame of reference or external societal changes. Findings of these cross-cultural comparisons are thus not absolute but closer to what Gergen termed "relational

realities" (in Brotherton, 1991).

Up to this point in time, our understanding of certain cultural group is often confined within the parameters set by the researchers (the variables chosen for the studies, selected participants, methodologies, and explanations) and possibly is affected by the worldviews or cultural identities of the researchers. Researchers' ways of knowing affect their perceptions of cultural realities and their interpretations of differences. Could it be possible that this generation of researchers trained mostly in the empirical, rational and scientific professional backgrounds have appeared simplistic and inadequate dealing with the complexities of culture and multiple belief systems (Brotherton, 1991)? What inferences may we draw about these cultural groups with little systemic understanding? How counseling practitioners working in cross-cultural relationships may synthesize and imply such research results? What might be other alternatives for cultural understanding in the years to come?

### Synthesis of Variables Mediating Worldviews

Some researchers found such background factors affecting worldviews of their participants as gender (e.g. J. Yang, 1998; Ihle, et al, 1996), religion (J. Yang, 1998), education & marital status (Ihle et al, 1996), and modernity (K.S. Yang, 1982). Other writers offered more dynamic speculations of factors accounted for worldview variations. Examples include deeply rooted beliefs, personal identity /personal integrity development, politics/cultural contexts, behaviors in reaction to external forces in a given historical or present time, professional affiliation like counseling, modernization of developing societies, and within-group differences (Carter, 1990; Cheng et al., 1995; Sadowsky, et al, 1994; Yang, 1982;). All supporting that culture is more complex and dynamic than what the traditional value orientations could suggest (Pedersen, 1994). Could we still make inferences from the previous findings about the variables depicting the within-cultural and cross-cultural differences? The author believes that what we can benefit from these research findings may not be from what's presented in one particular study but the dynamic opportunities in synthesizing the variations longitudinally (e.g. changes of cultural pattern of certain groups overtime) and horizontally (comparisons of the change patterns across groups).

### Reciprocity of Cultural Changes

Yang (1982) made inferences from his findings that Taiwanese college students at that time (future and individualistic preferences) tended to hold value orientations similar to those of White American students and that the deviation from the Chinese traditions was influenced by industrialization. His view has been supported by many other researchers (Sadowsky, 1994). Interestingly, American cultural values at that time were found to be non-western oriented (Green, in Yang, K.S. 1982). That was less individualistic and more harmonious. Yang thus made prediction that Chinese values would return to the Confucius's tradition in the postindustrial era. Almost two decades later, the author's recent findings of a national survey reflected the reciprocity of cultural change (Yang, J, 1998)

### The Acculturation Processes and Value Shifts

Many agree that extra-cultural influences such as political and economical changes, cultural



adjustments, and adaptation to a new cultural context could account for the within or between group differences. A closer look at the differing patterns reveals interesting insights not discovered in each of the studies. The differences between (a) the international groups and their host cultures, (b) counselors (or counseling students) and clients, and (c) African Americans and White Americans, and (d) the endeavoring groups and the harmonious groups all suggest a common theme of change process or goal-directed living status (survival, identity and supports). This may have some association with the acculturation processes in which individuals' values are required to shift. While the cultural frameworks may vary, the psychological processes of relating to an external cultural context may be similar (e.g. international students' cultural adjustments, African Americans' striving for social justice in the dominant white American society, Taiwanese' reactions to industrialization, and clients' problem solving or personal growth). There is no evidence, however, that these transitional value shifts would lead to long term changes (Hsu, in Sodowsky, 1994; Miller, Yang & Chen, 1997; Yang, 1991, 1995, 1997) in value orientations.

### Within Group Variations Counteracting Group Differences: Statistical Myths

The intertwined phenomena between individual uniqueness and cultural patterns the individuals subscribe to are perpetuating and often appears in the researchers' interpretation of their research results. For example, Sodowsky, et al (1994) concluded "The information about "typical" characteristics of White Americans, Chinese, Taiwanese, and African students is of limited value, especially in one-to-one or small-group interactions. A practitioner needs to be sensitive to international clients' individual world views" (p.322). One may look at the inconsistent findings and reaches an impression that maybe there is not much group difference at all then set back to the old mono- belief of individual difference. That would parallel a statistical effect called "regressing to toward the mean" as the mean of means would tend to neutralize the differences. While the power of F ratios lies in the pull of the denominator (individual differences) with a good size of samples, the struggles between the individual and group worldview could be reflective of the discrepancies between statistical observations and real life experiences. When individual differences and cultural patterns are not treated as two opposite variables separated by the empirical definitions, a third dimension is uncovered. That is the co-existence of experiences in both individual and reference group levels (and often more than one group) which construct bicultural or multicultural identities in a person.

### Postmodern Perspectives: Promises and Challenges

**In the postmodern era, traditional methodology of categorizing cultural uniqueness is questioned and challenged based on a social consciousness of multiple perspectives of cultural realities. In this paper, the author examined the issues and utilities of worldview studies with respects to methodology, interpretation, and statistical concepts. The author also attempted to prove that the previous research findings could be still fertile for multiple interpretation of the shifting configuration of cultural patterns and individual identities. This fluid nature of cultural realities may point to more conflicts with which the sensitive counseling practitioners are challenged (or allowed) to develop better insights and strategies dealing with individuals who experience unprepared, unpredicted or unwanted changes due to internal or external cultural transitions (Brotherton, 1991, Ponterotto, 1996)**

To theorists like Kelly and Lewins, individuals are producers of their own development and

development is contextual (in Yang, 1993). Postmodernism rejects the traditional concepts of norms, classifications of human experiences and adopts the view that culture is in the making of the individual who actively participates in his/her ever-changing world (Brotherton, 1991; Ellis, 1997; Ivey, Ivey, & Simek-Morgan, 1997; Pedersen, 1994; Rigazio-Digilio Ivey, & Locke, 1997). Models like The Cultural Grid and the MCT (Multicultural Counseling Theory) thus provide alternative perspectives on counseling theory, cultural identities, relational development, and counseling modalities and processes (Pedersen, 1994; 1995; Sue, Ivey, Pedersen, 1996). The authors find the Cultural Grid model very instrumental in her conceptualization of the national survey study on Taiwanese youth culture in which adolescent behaviors, their social system variables and their subjective cultural values are matched and measured (Yang, 1998).

Challenges remain, however, in the assessment and understanding of cultural values considering person-environment interaction. In their study of collectivism and individualism in relation to cultural contexts, social behaviors and phenomenon, Triandis, Bontempo, & Villareal (1988) observed that the distance between the observer and the data determined whether the collectivism and individualism construct is one-dimensional or multidimensional. They concluded that cultural and personality differences exist in the way self and in-group are inter-related. In the human services professions, individuals are over-evaluated by what Triandis termed "objective culture" (i.e. social system variable, Pedersen, 1994) but overlooked in their "subjective culture" (values, expectations). Unlike the objective cultural variables, which can be readily observed, subjective culture can only be inferred. Further understanding of how people interpret or construe events according to their own unique view requires researchers to "cross over" the borders (Brotherton, 1991). That is crossing the borders of the empirical and the naturalistic, the modern and the traditional, the east and the west, the statistical, the researcher and the researched. Only when deconstruction of the previous cultural myths takes place, a myriad of dynamic realities of cultural values can begin to be uncovered and appreciated.

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**Table 1 Research Findings of Worldview Differences**

Human Nature	Good	Mixed	Evil	N
Yang, K. S. (1982)	TW			408
Carter (1990)			AA>WA	799
Mau et al. (1993)	CO>CL		CL>CO	274
Sodowsky et al. (1994)			TI, CI>WA, AA>WA	224
Cheng et al. (1995)	IR>CH, AM	CH>IR, AM	CH>IR, AM	130
Yang, J. (1998)	TW, F>M ER>NR	TW, F>M ER>WR	M>F	2591
	<b>Person/Nature</b>	<b>Subjugation</b>	<b>Harmony</b>	<b>Mastery</b>
Yang, K. S. (1982)			TW	
Carter (1990)	AA>WA			
Mau et al. (1993)	CL>CO		M>F	
Sodowsky et al. (1994)	TI, CI>WA			
Cheng et al. (1995)		CH> AM		
Yang, J. (1998)		TW		
	<b>Social Relations</b>	<b>Lineality</b>	<b>Collaterality</b>	<b>Individualism</b>
Yang, K. S. (1982)			TW, HM	
Carter (1990)	AA>WA	WA>AA	WA>AA	
Mau et al. (1993)	CL>CO	CL>CO	M>F	
Sodowsky et al. (1994)	TI, CI>WA	TI, CI>WA		WA, CI>TI
Cheng et al. (1995)	TI, AA>CI			
	CH>IR, AM		CH>IR, AM	
Yang, J. (1998)	AM>IR			
	<b>Time Orientation</b>	<b>Past</b>	<b>Present</b>	<b>Future</b>
Yang, K. S. (1982)		TW	M>F	
Carter (1990)	AA>WA	TW, F>M	TW, M>F	
Mau, et al. (1993)	CL>CO			
Sodowsky et al. (1994)	AA>WA, CI		TI, CI>WA	
Cheng et al. (1995)	CH>IR, AM>IR	CH, IR>CH?	CH>IR, AM	
Yang, J. (1998)		TW	M>F	
	<b>Activity</b>	<b>Being</b>	<b>Being-in-Becoming</b>	<b>Doing</b>
Yang, K. S. (1982)		TW, LM	M>F	
Carter (1990)	WA>AA	AA>WA		
Mau (1993)		F>M		
Sodowsky et al (1994)			TI, CI>WA	

To be continued

Table 1 Continued

Activity	Being F>M	Being-in-Becoming CH>IR M>F	Doing
Cheng (1995)			
Yang, J. (1998)	F>M	TW	
Ihle, et al (1996)	<b>The Endeavoring Self</b> WW>WACL, CIWS>WAWCO TWS>CWS WAWCL>WAWCO CWS>WAWCO	<b>The Harmonizing Self</b> WAWCO WAWCO>CWS	N
Kwan, et al (1994)	CI, TI>HKI		
<hr/>			
AA: African Americans	AM: Americans	WA: White Americans	
CH: Chinese	TW: Taiwanese	IR: Irish	
CO: Counselor	CL: Clients	M: Male	
F: Female	ER: Eastern Religions	WR: Western Religions	
NR: No Religions	LM: Low Modernization	HM: High Modernization	
CI: Chinese Int'l Students	TI: Taiwanese Int'l Students	HKI: Hong Kong Int'l Students	
WW: White American Women	CWS: Chinese Woman Students	WACL: White American	
Clients CIWAS: Chinese Woman Students	WAWCO: White American Woman Counselor		
TWS: Taiwan Woman Students			

# THE APPLICATION OF JACKKNIFE AND BOOTSTRAP METHODS TO THE SMALL SAMPLE SIZE RESEARCH

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## Introduction

The traditional approaches have relied on calculating the standard error of the estimate under the normality assumption. Such an assumption, however, may be tenuous for data collected from an unknown distribution when sample sizes are small, such as counseling group.

This research used the Monte Carlo simulation technique to estimate the population standard deviation. Specific tasks included the following:

1. Finding out which of the six methods (Unbiased Estimator, Simple Standard Deviation, Jackknife, Pivotal Jackknife, Bootstrap and Bootstrap Pivot) were the most powerful among four kinds of population distribution—Uniform ( $U(a,b)$ ), Normal ( $N(\mu, \sigma^2)$ ), Double Exponential ( $DE(\Theta, \sigma)$ ), and Exponential ( $E(\sigma)$ ) distributions.

2. Deciding what percentage of the time the true standard deviation was covered in these resampling confidence intervals estimators.

## Jackknife Method

The Jackknife procedure for estimating the population standard deviation  $\sigma$  has been conceptually quite simple, involving the following three steps:

Step 1. Let  $Y_1, Y_2, \dots, Y_n$  be a sample of independent and identically distributed random variables. Let  $\hat{\theta}$  be an estimator of the parameter  $\theta$  based on the sample of size  $n$ , splitting into  $g$  groups of size  $h$  each, then  $n=gh$ . Let  $\hat{\theta}_{-i}$  be the corresponding estimator based on the sample of size  $(g-1)h$ , where the  $i$ th group of size  $h$  has been deleted.

Step 2. Next,  $n$  pseudovalues  $J_i$  have been calculated so that

$$J_i = g \hat{\theta} - (g - 1) \hat{\theta}_{-i} \quad (i=1, \dots, g).$$

Since both  $\hat{\theta}$  and  $\hat{\theta}_{-i}$  were estimators of the population's standard deviation  $\sigma$ , each  $J_i$  was also an estimator of  $\sigma$ .

Step 3. Now, we treat the  $n$  pseudovalues  $J_1, J_2, \dots, J_n$  as if they were a random sample from a normal population. The mean and standard deviation of the pseudovalues were computed in the usual way, and we denote them by  $\bar{J}$  and  $S_J$ .

$$\bar{J} = \frac{1}{g} \sum_{i=1}^g J_i = g\hat{\theta} - (g-1) \frac{1}{g} \sum_{i=1}^g \hat{\theta}_{-i}$$

$$S_J = \sqrt{\frac{\sum_{i=1}^g (J_i - \bar{J})^2}{g-1}}$$

Tukey(1958) called  $J_i$  the pseudovalue and created the name Jackknifed Estimator for  $\bar{J}$ .

Next, we computed the estimated standard deviation of  $\bar{J}$ , denoted here by  $S_{\bar{J}}$ ; just as for the sample mean  $\bar{X}$ .

$$S_{\bar{J}} = \frac{S_J}{\sqrt{n}} = \left[ \frac{1}{g(g-1)} \sum_{i=1}^g (J_i - \bar{J})^2 \right]^{\frac{1}{2}}$$

The statistic

$$\frac{\bar{J} - J}{\sqrt{\frac{1}{g(g-1)} \sum_{i=1}^g (J_i - \bar{J})^2}}$$

should then have an approximate t distribution with g-1 degrees of freedom and constitute a statistic for robust interval estimation.

The Jackknife confidence limits for  $\sigma$ , with approximate confidence coefficient  $1 - \alpha$ , were:

$$\bar{J} \pm t_{(n-1), (1-\frac{\alpha}{2})} S_{\bar{J}}.$$

## Bootstrap Method

The Bootstrap method was developed by Efron (1979) as an alternative to the Jackknife method. The Bootstrap method was thought to be more widely applicable and dependable than the Jackknife method. The term "Bootstrap" comes from the expression "pulling yourself up by the bootstraps." In statistical terms, it refers to the fact that one available sample gives rise to many other samples. It is a computer-based method, which substitutes a considerable amount of computation for theoretical analysis. The bootstrap method can routinely answer questions which have been far too complicated for traditional statistical analysis. Even for relatively simple problems, computer-intensive methods like the Bootstrap were an increasingly good data-analyzing bargain in an era of exponentially declining computational costs.

Assuming that there are  $n$  independent and identically distributed observations from an unknown cumulative distribution function,  $F(X, \theta)$ , the Bootstrap procedure (Efron, 1979) uses the following steps:

1. Construct the sample probability distribution  $\hat{F}$ , putting mass  $1/n$  at each point  $x_1, x_2, \dots, x_n$ .

2. With  $\hat{F}$  fixed, draw a random sample with replacement of size  $n$  from  $\hat{F}$ , say

$$X^*_i = X^*_i, \quad X^*_i \sim \text{ind } \hat{F} \quad i=1, 2, \dots, n.$$

This will be called the bootstrap sample.

3. Calculate the estimate of  $\theta$  based on the Bootstrap sample.

4. Repeat Steps 2 and 3  $r$  times to get  $r$  estimates of  $\theta$ , denotes  $\hat{\theta}_{(i)}$ ,  $i=1, 2, \dots, r$ .

The Bootstrap estimate,  $B_n(\theta)$ , is then given by

$$B_n(\theta) = \frac{1}{n} \sum_{i=1}^n \hat{\theta}_{(i)}$$

With variance

$$\hat{Var}(B_n(\theta)) = \frac{1}{(n-1)} \sum_{i=1}^n (\hat{\theta}_{(i)} - B_n(\theta))^2.$$

### Basic Notations

Notation	Definition
$n$	The sample size
$r$	The number of replications
$\hat{S}$	The sample estimate of a population standard deviation calculated from the original sample $= [\sum_{i=1}^n (X_i - \bar{X})^2 / (n-1)]^{1/2}$
$\hat{S}_{-i}$	The sample estimate when $i$ th observation is omitted and the estimate is found from the remaining data
$J_i$	A jackknife "pseudovalue" for each delete-one group $= n\hat{S} - (n-1)\hat{S}_{-i}$
$\bar{J}$	The Jackknife estimator of the population standard deviation $\sigma$ $=$ The mean of the $J_i$ $= \sum_{i=1}^n J_i / n$
$PJ_i$	Pivotal Jackknife for each delete-one group $= n\hat{S} - (n-1)\hat{S}_{-i}^2 / \hat{S}_{-i}$



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$\overline{PJ}$	The mean of the PJi $= \sum_{i=1}^n PJ_i / n$
$B_i$	The standard deviation of each Bootstrap sample $= \hat{S}_i$
$\overline{B}$	The mean of the $B_i$ $= \sum_{i=1}^r \hat{S}_i / r$
$BP_i$	The Bootstrap pivot of standard deviation for each Bootstrap sample $= \hat{S}^2 / \hat{S}_i$
$\overline{BP}$	The mean of the $BP_i$ $= \sum_{i=1}^r BP_i / r$
$E(\hat{S})$	The expected value of estimator
$V(\hat{S})$	The variance of estimator
$B(\hat{S})$	The bias of the estimator $= E(\hat{S}) - \sigma$
$MSE(\hat{S})$	The mean square error of the estimator $= V(\hat{S}) + [B(\hat{S})]^2$
$UBE(\hat{S})$	The unbiased estimator, based on the maximum likelihood estimator.

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## Results

The results of this study suggested the following:

1. As sample size increases, all estimators of the sample standard deviations approached the population parameter except for the double exponential distribution, which is a very heavy tailed distribution (Table 1).

2. The distribution of the sample standard deviation approached a normal distribution as sample size increased except for the Unbiased estimator of the uniform distribution (Table 2).

3. As expected, the appropriate Unbiased estimator was the best estimator for small samples among the six estimators in this study. However, it is available only when the form of the true distribution was known (Table 1 and 2).

4. For situations in which the true distribution is not known, five non-parametric estimators were studied. No single estimator was best for both point and interval estimation. For purposes of this summary, an estimator is considered best for point estimation if it minimizes the mean squared error. For interval estimation, an estimator is superior if it produces intervals for which the coverage proportions best match the stated confidence levels (Table 1 and 2).

5. As sample size increases, more estimators can be used (Table 1, 2 and 3).

6. Some lower level (90% or 95%) confidence intervals can be obtained by using higher coefficient level (95% or 99%). For example, we need to use the pivotal Jackknife estimator at a 99% level to obtain a 95% level confidence interval for the normal distribution (Table 2).

7.If there is no idea about the distribution of our collected data, this research has suggested using the Bootstrap estimator for a point estimate for the sample sizes in this study. The Jackknife estimator was best overall for confidence interval estimate (Table 1, 2 and 3).

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Table 1

Empirical Estimates of Mean, Variance, Bias, and Mean Square Error of Sample Standard Deviation for Various Sample Sizes Using Various Methods from Various Population Distributions

Stat.	Methods	n=10			n=20			n=30					
		U(0,1)	N(0,1)	DE(0,1)	E(1)	U(0,1)	N(0,1)	DE(0,1)	E(1)	U(0,1)	N(0,1)	DE(0,1)	E(1)
E( $\hat{S}$ )	UBE	.2884	1.0563	.9949	1.0014	.2889	1.0269	1.0020	.9936	.2887	1.0177	1.0010	.9997
	$\hat{S}$	.2834	.9750	1.3242	.9210	.2869	.9879	1.3751	.9518	.2876	.9920	1.3877	.9702
	$\bar{J}$	.2888	1.0054	1.3935	.9834	.2889	1.0016	1.4134	.9880	.2888	1.0010	1.4141	.9963
	$\overline{PJ}$	.2653	.8659	1.0305	.5874	.2809	.9437	1.2354	.8023	.2840	.9635	1.2973	.8712
	$\bar{B}$	.2655	.8893	1.2198	.8579	.2782	.9477	1.3164	.9074	.2827	.9602	1.3377	.9477
	$\overline{BP}$	.3204	1.1115	1.6777	1.2413	.3010	1.0480	1.5232	1.0954	.2973	1.0259	1.4720	1.0741
v( $\hat{S}$ )	UBE	.0007	.0620	.0963	.0995	.0002	.0275	.0497	.0496	.0001	.0182	.0343	.0331
	$\hat{S}$	.0022	.0528	.2019	.1462	.0010	.0255	.1156	.0777	.0006	.0173	.0794	.0577
	$\bar{J}$	.0022	.0566	.2435	.1938	.0010	.0262	.1309	.0940	.0006	.0176	.0865	.0672
	$\overline{PJ}$	.0028	.0519	.2133	.3856	.0010	.0243	.0915	.0706	.0007	.0164	.0632	.0454
	$\bar{B}$	.0020	.0445	.1835	.1151	.0008	.0249	.1001	.0680	.0005	.0169	.0684	.0469
	$\overline{BP}$	.0025	.0760	.5689	.5334	.0009	.0307	.1691	.1625	.0006	.0190	.0965	.0840
B( $\hat{S}$ )	UBE	-.0003	.0563	-.0051	.0014	.0002	.0269	.0020	-.0064	.0000	.0177	.0010	-.0003
	$\hat{S}$	-.0053	-.0250	.3242	-.0790	-.0017	-.0121	.3751	-.0482	-.0011	-.0080	.3877	-.0298
	$\bar{J}$	.0001	.0054	.3935	-.0166	.0002	.0016	.4134	-.0120	.0001	.0010	.4141	-.0038
	$\overline{PJ}$	-.0243	-.1341	.0305	-.4126	-.0077	-.0563	.2354	-.1977	.0046	-.0365	.2973	-.1288
	$\bar{B}$	-.0232	-.1107	.2198	-.1421	-.0104	-.0523	.3164	-.0926	-.0059	-.0398	.3377	-.0523
	$\overline{BP}$	.0317	.1115	.6777	.2413	.0123	.0480	.5232	.0953	.0087	.0259	.4720	.0741
MSE( $\hat{S}$ )	UBE	.0007	.0652	.0963	.0995	.0002	.0283	.0498	.0497	.0001	.0185	.0343	.0331
	$\hat{S}$	.0023	.0534	.3071	.1524	.0010	.0256	.2564	.0800	.0006	.0173	.2297	.0586
	$\bar{J}$	.0022	.0567	.3983	.1941	.0010	.0262	.3018	.0942	.0006	.0176	.2580	.0672
	$\overline{PJ}$	.0033	.0698	.2143	.5558	.0010	.0274	.1469	.1097	.0007	.0177	.1516	.0619
	$\bar{B}$	.0026	.0567	.2318	.1353	.0009	.0276	.2002	.0766	.0006	.0185	.1824	.0497
	$\overline{BP}$	.0035	.0885	1.0282	.5917	.0010	.0330	.4429	.1716	.0006	.0196	.3193	.0895

Note.  $\sigma_u = .28887$ ,  $\sigma_n = 1.000$ ,  $\sigma_{DE} = 1.0000$ ,  $\sigma_E = 1.000$ .

Table 2

Empirical Estimates of the Percentage of the Sample Confidence Intervals Including True Standard Deviation for Various Sample Sizes Using Various Methods from Various Population Distributions

C.I.	Methods	n=10				n=20				n=30			
		U(0,1)	N(0,1)	DE(0,1)	E(1)	U(0,1)	N(0,1)	DE(0,1)	E(1)	U(0,1)	N(0,1)	DE(0,1)	E(1)
90%	UBE	.8988	.9145	.9035	.9415	.8965	.9078	.8980	.9180	.8995	.9010	.8913	.9113
	$\hat{S}$	.9783	.9058	.5665	.6735	.9843	.9070	.3883	.6408	.9855	.8945	.2813	.6178
	$\bar{J}$	.9100	.8720	.8403	.7080	.9178	.8880	.7038	.7583	.9108	.8840	.5703	.7670
	$\overline{PJ}$	.9045	.8575	.9155	.7033	.9133	.8758	.8845	.7523	.9063	.8813	.7950	.7640
	$\bar{B}$	.8400	.7120	.7800	.5740	.8960	.7920	.7420	.6520	.8880	.8320	.5720	.7580
	$\overline{BP}$	.8340	.8500	.4860	.7020	.8880	.8240	.3900	.6960	.8840	.8400	.2640	.7960
95%	UBE	.9540	.9635	.9525	.9760	.9480	.9568	.9498	.9698	.9498	.9520	.9483	.9583
	$\hat{S}$	.9915	.9545	.6445	.7658	.9948	.9538	.4615	.7293	.9975	.9473	.3363	.7055
	$\bar{J}$	.9450	.9128	.9248	.7585	.9558	.9300	.8438	.8090	.9563	.9285	.7390	.8195
	$\overline{PJ}$	.9413	.9038	.9463	.7563	.9545	.9228	.9390	.8018	.9528	.9245	.8913	.8118
	$\bar{B}$	.8740	.7740	.8500	.6160	.9320	.8460	.8440	.7080	.9340	.8840	.7220	.8160
	$\overline{BP}$	.8760	.8880	.5400	.7660	.9300	.8920	.4540	.7880	.9340	.9040	.3460	.8420
99%	UBE	.9895	.9968	.9875	.9956	.9903	.9935	.9915	.9933	.9888	.9930	.9875	.9935
	$\hat{S}$	.9985	.9918	.7608	.8830	.9998	.9898	.5873	.8688	1.0000	.9900	.4668	.8405
	$\bar{J}$	.9803	.9625	.9795	.8353	.9900	.9728	.9698	.8745	.9908	.9733	.9348	.8868
	$\overline{PJ}$	.9800	.9570	.9808	.8383	.9880	.9683	.9883	.8728	.9898	.9685	.9758	.8838
	$\bar{B}$	.9160	.8360	.9220	.6740	.9700	.8980	.9560	.7500	.9800	.9340	.9000	.8560
	$\overline{BP}$	.9320	.9400	.6240	.8480	.9720	.9540	.5740	.8880	.9680	.9740	.4800	.9220

Table 3

Empirical Estimates of the Width of the Sample Confidence Intervals for Various Sample Sizes Using Various Methods from Various Population Distributions

C.I.	Width	Methods	n=10			n=20			n=30					
			U(0,1)	N(0,1)	DE(0,1)	E(1)	U(0,1)	N(0,1)	DE(0,1)	E(1)	U(0,1)	N(0,1)	DE(0,1)	E(1)
90%		UBE	.0902	.8695	1.2003	1.1594	.0437	.5628	.7931	.7733	.0289	.4471	.6311	.6204
		$\hat{S}$	.2595	.8930	1.2128	.8435	.1654	.5695	.7927	.5487	.1306	.4506	.6303	1.4407
		$\bar{J}$	.1931	.8509	1.4744	1.1237	.1138	.5521	1.0641	.8342	.0874	.4454	.8795	.7095
		$\overline{PJ}$	.2180	1.0472	2.1536	2.0490	.1175	.6087	1.3273	1.1813	.0890	.4761	1.0290	.9174
		$\overline{B}$	.1570	.6295	1.0632	1.7690	.1032	.4709	.8645	.6630	.0825	.3910	.7330	.6018
		$\overline{BP}$	.2193	.9446	1.9763	1.6685	.1166	.5536	1.1251	.9805	.0889	.4322	.8679	.7639
95%		UBE	.1163	1.0730	1.4924	1.4307	.0554	.6812	.9650	.9360	.0363	.5382	.7625	.7468
		$\hat{S}$	.3224	1.1093	1.5067	1.0479	.2009	.6916	.9627	.6664	.1576	.5435	.7603	.5316
		$\bar{J}$	.2383	1.0501	1.8195	1.3867	.1377	.6683	1.2880	1.0097	.1052	.5361	1.0587	.8540
		$\overline{PJ}$	.2690	1.2923	2.6561	2.5386	.1423	.7368	1.6067	1.4298	.1071	.5731	1.2386	1.1042
		$\overline{B}$	.1886	1.7384	1.2206	.8817	.1235	.5568	1.0067	.7589	.0985	.4634	.8590	.6937
		$\overline{BP}$	.2917	1.2178	2.5130	2.2180	.1440	.6778	1.3734	1.2258	.1082	.5223	1.0507	.9283
99%		UBE	.1831	1.5415	2.1792	2.0554	.0834	.9311	1.3353	1.2794	.0539	.7254	1.0369	1.0065
		$\hat{S}$	.4704	1.6185	2.1981	1.5288	.2767	.9528	1.3262	.9180	.2135	.7363	1.0301	.7202
		$\bar{J}$	.3424	1.5086	2.6139	1.9921	.1882	.9135	1.7605	1.3802	.1418	.7226	1.4268	1.1510
		$\overline{PJ}$	.3864	1.8565	3.8179	3.6326	.1945	1.0071	2.1962	1.9544	.1443	.7724	1.6693	1.4882
		$\overline{B}$	.2481	1.9388	1.4978	1.0595	.1637	1.7190	1.2685	.9400	.1297	.6034	1.0962	.8738
		$\overline{BP}$	.5024	1.9471	3.9739	3.7215	.2072	.9535	1.9439	1.7504	.1488	.7149	1.4449	1.2963

# **REFLECTIONS ON THE SHIFTING PARADIGM IN MENTAL HEALTH CARE AND NO-FAULT THERAPY**

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## **Introduction**

As with any discipline, there comes a time when [it] has to redefine itself amid changing circumstances. Such a need for redefinition is taking place in behavioral health care with the rapid growth and prominence of managed-care organizations such as HMOs and the like, all of which are promising, cost-effective and higher quality care in managed-care intervention.

Managed-care is a new reality with respect to reimbursement by third-party payers and managed-care is precisely what it means—managing mental health resources that translates into low cost psychotherapy in as brief a duration as therapeutically possible and in terms of what managed-care deems appropriate to the specific impairment.

This is clearly illustrated when clinical practice entails negotiating on behalf of mental health consumers access to mental health benefits. One might, therefore, easily surmise from what can only be adduced as corporate reinventing of care as rationing of [mental health] resources influenced, in part, by arbitrary and non-clinical circumstances.

And this policy analysis is by no means only of theoretical interest. What rouses skepticism is the phenomenologic observation that this schema most tellingly complicates and undermines workable goals and treatment strategies. And this is most apparent when one recognizes the obvious shift in contemporary (managed) mental health care resources away from mental health professionals to an unseen third party.

Under these terms and conditions, company profits are assured since treatment [costs] is influenced and determined by economic interests which override treatment issues.

The immediately engaging response from clinicians can only be a perception of unwarranted intrusion in professional matters which ultimately leads to tension, misunderstanding, and even hostility between service providers and insurers, thereby creating problems in the intimacy and immediacy of the treatment process.

In capsule form, then, partnering in the managed-care environment, with [its] incursion into the exclusive domain of therapist-client relationships, will be an occurrence of dire portent for the therapist. For what this means is that treatment decisions, as they reflect therapists' [conceptual and diagnostic] judgment and strategies, along with "customary and reasonable fees," are now subject to review by health insurance representatives in the person of case managers.

Unlike non-managed-care and self-paying clients, the net effect of intrusiveness will be to place, at-risk, the therapeutic relationship itself with its confidentiality and respect for the individual.

In his text, *Psychotherapy in the Age of Accountability* (1995), Johnson acknowledges that "insurance companies have intruded (emphasis mine), to an extraordinary degree, into the relationship between patient and therapist" (p. 4), but Cornell (1996) notes, in his review of Johnson's tome, an optimistic view that "these intrusions are for the sake of quality assurance rather than for profit and control" (p. 14).

Elsewhere in the extant literature, Cornell (1994) has written that while this monitoring scheme "meets the legal, ethical, bureaucratic or organizational requirements of an agency, a government body, a funding source or a professional association . . . [it] does not serve the client or the therapist particularly well as it is designed to meet the needs of an external body" (p. 28).

#### Collaboration: The Fulcrum of Care Giving

When placed in perspective, managed-care is a profit-seeking enterprise whose mission is immutably welded to cost savings through restricted coverage.

And to this end, the whole process turns on the therapist's understanding that membership on the [preferred psychotherapist] provider list of managed-care organizations implies a willingness for developing or collaborating with managed-care systems, reimbursable treatment plans perceived as justifiable and cost-effective.

On the other hand, revamping mental health coverage may, in part, also reflect both managed-care and health insurer's doubts and skepticism regarding the efficacy and permanency of [talk] therapy in "curing" mental illnesses or in relieving symptoms and reversing maladaptive functioning.

Therefore, it should be no surprise that among some managed-care operatives, pharmacotherapy considerations increasingly supplant psychological approaches as "treatment of choice" given their predictability, availability, and low cost over traditional talk therapy.

It seems almost unnecessary to suggest that the transformational changes now underway in behavioral health benefits need to be recognized by practitioners as a primal opportunity to clarify their knowledge base and openly acknowledge the limits of our understanding of human behavior.



## Fiscal Oversight Through Case Management

It is, indeed, almost a forgone conclusion that managed-care organizations would replace their clinically-trained administrators of benefits with individuals whose expertise is in the field of business. And, obviously, this change in the corporate structure has given rise [rightly or wrongly] to a perception among mental health clinicians of greater emphasis on cost and savings over therapy and developmental issues.

While this change presumably ensures efficient, economically-sound therapeutic coverage, one cannot ignore perceptions of “arbitrariness” with the emphasis on profit and cost containment. At the same time, the overall implications of these changes and perceptions (e.g., ominous signs of rationing mental health resources) cannot be ignored.

For example, there may be currency in the argument that what therapists are experiencing in the managed-care environment is, in fact, “case managing from above”—a corporate effort to rein in and control [what is perceived to be] unacceptable cost in mental health services.

But there remains, fundamentally, the uncomfortableness of some [practitioners] who regard case managers as ethically and professionally unacceptable in matters of therapy considerations and diagnostic decisions. Furthermore, what must also be unsettling is the simple fact that managed-care represents a totally new “ball game” given the restrictive policies and constraints redefining, if not reinventing, psychotherapy, including questions of who/what is diagnosable and treatable in a managed-care context.

And what must surely unhinge our clinical posture, concurrent with “managed” resources, is the demand for newer conceptual models of therapies that can be slotted into economically-accepted time frames. As a response to this emerging and [perhaps] intimidating age of managed-care, we propose no-fault intervention—a brief and strategic therapy that focuses on what is positive and possible in a managed-care context.

### Empowerment and Self-Responsibility: The Essence of No-Fault

The end outcome in no-fault is cognitive restructuring and problem-solving skills which are accomplished through an active, directive, structured, short-term, goal-oriented focus. This approach enables the therapist to bolster clients’ strengths and coping capacities in ways that facilitate growth and change in their lives.

The essence of no-fault therapy is an actively focused perspective minimizing, if not eliminating client’s unreasonableness in emotive and rational behavior. We do this by strengthening and empowering the ego to examine and judge reality (i.e., congruible issues) inasmuch as the latter is accessible to it, and is able to anticipate the future.

By empowerment, we mean interpenetratively, a process whereby new revelations in symptomatologic behavior and its contexts meld with the person’s present or unfolding state of

understanding, thereby gaining new insights for managing their lives more effectively.

In brief, empowerment is the acquisition and constructive use of information facilitating the social, cognitive and emotional well-being of the person. Empowerment helps clients rescript their personal difficulty in more positive terms. In other words, empowerment is the connector between thought and behavior.

But before empowerment can become meaningful, authenticity of selfhood is our first priority—ergo we insist on individual acknowledgment and ownership of the presenting problem and its eventual resolvableness. While ownership from our point of view is a given with the initial interview, client acceptance of ownership [at the outset of therapy] facilitates collection of subjective and objective antecedents for diagnostic thinking and therapeutic action, thus, influencing the ego's field of consciousness for shaping behavior in a forward direction (i.e., toward the future).

Indeed, it is a fact of experience that the only really effective way of overcoming a client's functional impairment and emotional uncomfortableness is to quickly move to address its psychic representation (in this instance, blaming behavior) thereby improving ego functioning and its fusion with reality.

We act on the premise that interpersonal and situational explanations by the individual represent a series of [acquired] habit patterns and are governed by cognitive and experiential processes in which antecedent events, beliefs and expectations, prior learning experiences and behavioral consequences play important roles in their continued use.

Therefore, understanding the impact of environmental factors on intrapsychic and interpersonal life helps us in recognizing and affirming clients' strengths and resiliency in efforts to make meaning of and alter their situation. While this construct provides the interesting possibility of penetrating more deeply into the interplay between the person's external and inner reality, we are restrained by a reality-based focus on behavior that is [reasonably] changeable and maintainable in the immediate and forthcoming reality.

As stated in an earlier publication (Millard, 1988), "In the no fault approach, we take the philosophical position [that] the past, unpleasant as it may be for the individual, will take care of itself. Focus must remain in the here-and-now, with minimal attention to those unpleasant moments of the past" (p. 43). Furthermore, "what is critical to our judgment of the person's suitability for the no fault counseling is the absence of irreparable damage to the ego or indications of profound disturbances in the capacity to relate to people. Individuals who exhibit an unconscious need for conflictive relationships or who give evidence of severe emotional or cognitive dysfunction are not suitable candidates for this approach" (p. 34).

## Assumptions of No-Fault Approach

The assumptions undergirding no-fault intervention include the following:

- Blaming represents suppression and denial; the person has a need to control events and protect the ego since self-blame leads to anxiety, which leads to depression.
- For re-establishing a sense of balance and stability in the individual, therapeutic intervention must quickly access the ego's field of consciousness and consequently the person's ability to judge his/her situation with regard to which the person has to behave.
- To bide one's time until the individual feels comfortable and able to ventilate and work through feelings around [problem] ownership is not the best use of limited-time intervention. Ownership—*nota bene*—in a no-fault context, is a given (emphasis mine) with the initial interview.
- Problems that individuals bring to therapy are not singular but multiple and systemic—ergo therapy must ensure the usefulness and transferability of problem-solving skills beyond termination of therapy.
- Mindfulness as a precursor of empowerment is strengthened when the person demonstrates appropriate preoccupation with the problem (i.e., takes charge) rejects blaming, and is committed to change.
- Short-term intervention [in the here and now] must be straight-forward, result-oriented and facilitative in its approach.

## The Process

To begin, the whole of the psychic life of the individual can be described in terms of ego function. And since the ego's field of consciousness is, indeed, far from being fixed in space, but capable of great extensions—*mutatis mutandis*—our initial act is to structure the therapy wherein individual acknowledgment and ownership of the problem plays a [key] role in extending the ego's field of consciousness and, therefore, becomes an enduring aspect of therapy and beyond.

Being mindful of slippage in ego function, we put in place procedures and techniques that ensure against this possibility. As for example, when the individual shows signs of falling back on the repetitive mechanisms of blaming, we point out to the person [in an interpretive or observant way] what he/she is doing to the process and redirect this psychic energy back to the issues under focus. And for the duration of therapy this injunction remains in force, since it is the cornerstone of no-fault intervention.

An illustration might be helpful here:

- Client: . . . And I am tired of my husband's complaints. It seems I can never do anything right. He never seems to find anything to compliment me on . . . always this, always that he finds wrong. I can never satisfy him—even in bed. (Pause) When we were living together, he was so swell. He was attentive and always had nice things to say to me, even when my hair was in curlers and looked like hell. (With the break in client's narration, therapist becomes interjectural.)
- Therapist: Mrs. C., I understand the hurt and frustration you are experiencing and it is clear to me you want to resolve this matter. But how does your complaining help us (by "us" therapist subtly reminds client of the purpose of therapy) in resolving the problem you outlined in the first session.
- Client: . . . I don't know. I just had to say these things (wiping away her tears). I'm so damn angry at him.
- Therapist: O.K., but I do want to remind you of our earlier agreement in not finding fault or engaging in blaming behavior. As I said in our first meeting, blaming and fault-finding only robs us of precious time and energy in problem-solving. As you can see, your comments about your husband haven't brought us any closer to solving the relationship problem between yourself and your husband. (Here, the therapist offers a reality check.)
- Client: Yes, I know and I'm sorry (recomposing herself).
- Therapist: You need not be sorry. (Implied in comment is an accepting therapist who has relabeled the negative message of anger and hurt as well intentioned.) It is my job to keep you focused (therapist assumes responsibility for deviation in client behavior) and that is why I'm reminding you and redirecting your efforts to the issues you brought to me.

What is basic here is the quiddity in the process, wherein to promote good reasoning, creativity and emotivity in the person, we unequivocally make clear our prohibition in discussing who was (or is) at fault.

We would counsel the person that imputing blame or captiousness, in coping with life's tasks or situations, is a particularly telling example of non-productive use of psychic energy. Moreover, this behavior insensately deprives the individual (and the therapeutic relationship) of this much needed energy for the never-ending task of developing and maturing as a whole or complete person. That being so, it will not be difficult for the individual to understand the proscribed behavior as verboten and that strict adherence to this rule will be enforced by the therapist in unfailing watchfulness.

## Therapy by Contract

Transformational change resulting in greater congruence between self-esteem and ego adaptiveness is best achieved in a treatment paradigm focusing on reasonably changeable behaviors. Ego adaptiveness (or responsiveness) begins with listing [in order of importance] those issues, concerns, or problems associated with environmental deprivation and trauma that need addressing in short-term therapy.

Whether the listing is depression, fear, anger, loneliness, a poor self-concept, undesirable habits, poor communication or unsatisfactory relational experiences, this is not as important as weeding out those issues that clearly are beyond reach of brief contextual or behavioral intervention.

Once the agenda, with its straightforward language and commitment to immediate action, has been completed with agreement on priorities (including an agreed upon number of therapy sessions), what eventually emerges in the context of a collaborative venture is a "contract" fixed in duration, item-specific, goal-oriented and structured, thereby ensuring minimal intrusion of distracting thought.

The therapeutic alliance (i.e., "contracting" for therapy and renunciation of blaming" opens a window of opportunity that makes possible widening of the ego's field of perception. By developing information with the individual relative to cause, content, connections and consequences, we improve the cognitive and interpersonal skills that people need in order to improve their behavior.

And since our focus is reality-oriented, the therapy can be viewed as concrescence or "educational" since strengthening or liberating the ego depended in the first instance on the person's ability to incorporate [parts] into a whole or put another way, the integration of reasonability in behavior in strict concordance with the increase of ego strength.

To conclude, the no-fault approach reflects an eclectic format influenced by cognitive behavioral, insight-oriented, existentialism and the reality therpaies. No-fault intervention is short-term in application, present-centered and designed for relatively stable personality types (non-neurotic) who are experiencing adjustment disorders and are seeking explanations for their plight amidst the complexity and contentiousness of modern life.

And finally, we believe no-fault therapy has the potential to be cost-effective and a proven method for meeting managed-care requiriements.

It is viewed as an effective paradigm for promoting individual self-acceptance, personal responsibility, problem exploration, and solution-finding skills.

In conclusion, no-fault intervention is an [emotional] education in thinking, feeling, and behaving as witnessed by its nuts-and-bolts format and specific do's and don'ts in contextualizing time-limited therapy in a managed-care context.

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# THE SELF-AWARENESS-TRAINING PROGRAM IN COUNSELOR-EDUCATION

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## Introduction

Concerning the quality of counseling profession and education, CACREP (1994) required eight common-core areas: human growth and development, social and cultural foundations, helping relationships, group work, career and lifestyle development, appraisal, research and program evaluation, and professional orientation. Based on studies contents of "helping relationships," being aware of counselor and client traits, including characteristics and behavior, are also necessary and important, besides counseling theories and skills. In other words, counselor's ability of self-knowledge and/or self-awareness also plays a critical role in the helping relationships and counseling process (Chen, 1998a). Therefore, how to enable counselor's self-awareness becomes an important issue on counselor-education. In this paper, three empirical studies were presented as the major foundation to form the self-awareness-training program in counselor-education. These empirical studies were done sequentially to (1) define what self-awareness is, (2) explore how self-awareness-training strategy be conducted along with existing courses, and (3) evaluate the effects of self-awareness-training course from the viewpoint of counselor-students. Following by introducing previous studies briefly, the self-awareness-training program were offered to counselor-educators.

## Summary of Empirical Studies

### Study 1

Thirty-one practicing counselors (24 females and 7 males) were interviewed once individually to narrate his/her idea about self-awareness and personal experience related to self-awareness. Accordingly, self-awareness was defined as: *one is able to know, understand, self-examine, and think about one's own feeling, action, thought, I-thou relationship and personal characteristics in terms of the state, change, influence and cause.* In other words, self-awareness refers to a continuing process of "one observes oneself" and happens on both here-and-now and there-and-then. Concerning the principle of self-awareness-training, to enhance both experience and thinking is primary (Chen, 1996a).

### Study 2

Study 2 involved 9 counselor-educators (7 females and 2 males). They were also interviewed once individually to share how they conduct self-awareness-training and evaluate training effects in



counseling courses. In sum, two primary principles of conducting self-awareness-training are (1) setting human on the core and reflecting back to self and (2) emphasizing experiencing and stimulating thinking. Rooted on primary principles, counselor-educators tended to enhance students' self-awareness through (1) knowledge teaching, (2) thinking activities and homework, (3) experiencing activities and homework, and (4) role-playing and practical exercises. Concerning evaluating training effects, student's feedback and/or paper and teachers' observation were found as informal process instead of formal way (Chen, 1998b).

### **Study 3**

Thirteen volunteer sophomores (11 females and 2 males) from those who took the self-awareness course (a 2-semester-credits course) were interviewed to explore the learning process and follow-up effects. Three times of interview were conducted at the beginning of course (individually), the end of course (in-groups), and 3 months later (in-groups). As a result, counselor-students were impressed by the proper sequence of course structure, discussing and sharing experiences, the working-sheets that induced thinking and self-examination, and the safe and free atmosphere. In terms of learning effects, instructor, working-sheets, home-works, and discussion topics were found as major contributors. Accordingly, the main learning effects were to enable counselor-students' self-understanding, self-concept, self-confidence and self-respect, and to improve their interpersonal interaction, communication, and relationship (Chen & Wang, 1998).

### **Self-awareness Training Program**

According to previous empirical studies and related works (Chen, 1996b, 1996c, 1997a, 1997b), the author tended to develop a self-awareness-training program, a 2 or 3 semester-credits course containing about 16 to 18 sections, in terms of the contents, process/strategies and evaluation method (see Figure 1).

### **Beginning stage**

At the beginning of the program (the first 2 sections), training aims to establish the right concept of self-awareness. Therefore, clear introduction and knowledge teaching functions as the basic foundation of the whole program. In order to give students clear idea about what they can expect from this program and how they should do to comprehend the program, the instructor should give not only the syllabus, but also clear explanation. Concerning learning anxiety of beginners, the instructor has to remind them repeatedly in the first few sections. Moreover, in order to assure that students will be ready for future sharing and discussion, it's important to have all students follow the primary rules. The primary rules require all students maintain confidentiality and mutual-respect regarding privacy and trustworthiness. A special feature of this program is its allowing students involve program design partially in terms of section topics and process. At the first section, students will be asked for suggestion concerning certain section topics, which attracts them. Also, they got opportunity to express their ideas about how they like these topics would be done. Knowledge teaching refers to teach the definition, function and influences of self-awareness in counseling profession. The instructor should offer critical readings, including research papers and articles, to students to build up their basic knowledge. Moreover, the concept of awareness-cues and how to detect and discover these cues should be included at the beginning stage. As studies concluded, awareness-cues refer to physical senses, body reactions, feelings and emotions, and thoughts. These cues can be detected and discovered through self-induced and/or other-induced.

Beginning Stage	Learning-by-doing Stage Terminating Stage Program	(First 2 sections)	(Sections in between) (Last 2 sections) Evaluation
<p>1. Introduction</p> <ul style="list-style-type: none"> <li>*Syllabus</li> <li>*Rationale &amp; goals</li> <li>*Rules: confidentiality &amp; mutual-respect</li> <li>*Determining section topics</li> </ul>	<p>Prior to the section</p> <p>Home-works: Cognitive aspects</p> <ul style="list-style-type: none"> <li>*<u>Exploring sheets</u>: questions lead to explore personal worldview, values, &amp; priority</li> <li>*<u>Reading assignments</u>: to read and discuss relative books in-teams</li> </ul> <p>⇕</p> <p>Home-works: Experiencing aspects</p> <ul style="list-style-type: none"> <li>*<u>Observing sheets</u>: outlines lead to detect awareness-cues &amp; record the situations, contents &amp; discovery</li> <li>*<u>Situation assignments</u>: to experience certain situations personally in-teams</li> </ul>	<p>During the section</p> <ul style="list-style-type: none"> <li>*<u>Sharing &amp; discussion</u> among students: small group (3-4 persons) first, then whole class</li> <li>*<u>Practical exercise</u>: ex. staying with experiences, dialogue exercise</li> <li>*<u>Clarification, conclusion &amp; suggestion</u> offered by instructor</li> <li>*<u>Options</u>: audio-visual aids, institutes visiting</li> </ul>	<p>After the section</p> <ul style="list-style-type: none"> <li>*<u>Learning journal</u>: helping students to sum up what has learned from each section &amp; to write down any further thoughts, feelings related to self-awareness</li> </ul>
<p>2. Knowledge teaching</p> <ul style="list-style-type: none"> <li>*Definition, function, &amp; influences</li> <li>*Cues: physical senses, body reactions, feelings and emotions, and thoughts</li> </ul>			<p>Reviewing learning experiences &amp; effects</p> <ul style="list-style-type: none"> <li>*<u>Sharing &amp; discussing Term-paper</u>: to conclude learning experiences and effects from the program based on exploring-sheets, observing-sheets, and learning journals</li> <li>*<u>Generalization</u>: generalizing learning experiences and effects to personal daily life and counseling profession</li> </ul>
			<p>Evaluating program effects</p> <ul style="list-style-type: none"> <li>*Instructor's viewpoint</li> <li>*Students' performances: assignments, journals, paper</li> <li>*Students' feedback from feedback-sheet</li> </ul>
			<p>OR</p> <ul style="list-style-type: none"> <li>*Evaluating program effects through research design when resources are available</li> </ul>

Figure 1. The stages and strategies of self-awareness-training program

At this point, the instructor should lead discussion in-groups to clarify and answer questions to make sure that students really understand the program rationale and the purpose of each assignment.

### **Learning-by-doing stage**

The second stage is the leaning-by-doing stage (sections in between), which is the main body of this program. There are three parts of each section: prior to the section, during the section, and after section. Students should finish home-works prior to the section. In terms of format, home-works include exploring-sheets, reading assignments, observing-sheets, and situation assignments. Exploring-sheets are designed for exploring personal worldview, values, and priority based on the cognitive aspects. Contrarily, observing-sheets designed for detecting awareness-cues based on the experiencing aspects. Both reading assignments and situation assignments require teamwork. Students have to read and discuss relative books and to experience certain situations personally in-teams, then write personal reviews individually. Both books and situations are either appointed by the instructor or selected by team and approved by the instructor. Bringing along with home-works to the class, all students are expected to share and discuss their home-works. Meanwhile, in order to arouse sharing and discussion, small-group discussion, exercises, and other options (such as: films) are conducted vary with section topics. Before the section is over, it's important to have the instructor clarify and/or summarize what students shared and discussed during the section, and reflect it back to section topic and the self. The instructor needs to make critical comments or suggestions when it's necessary. After the section, students are required to complete learning journal to sum up what they has learned from each section and to record any further thoughts, feelings related to self-awareness.

### **Terminating stage**

The third stage of this program is terminating stage (the last 2 sections). After learning-by-doing, students need some time to review what they have experienced and learned through the whole process in order to consolidate their gains. At this stage, the term paper functions as the core material to achieve stage goal. On the term paper, students have to conclude their learning experiences and what they gain from the program based on exploring-sheets, reading assignments, observing-sheets, situation assignments, and learning journal. And sharing these with classmates. Meanwhile, it's instructor's responsibility to help students to relate their gains to personal daily life and counseling profession at this point.

### **Evaluation stage**

Finally, when all sections are over, the instructor has to evaluate program effects in order to improve the program and/or adjust it to certain group members. There are many ways to collect evaluation information, such as, instructor's viewpoint, students' performances and feedback that are available on regular base. Furthermore, if relative resources are available, evaluating program effects through a research design is obviously another good option.

### **Conclusion**

In sum, the author intended to design a self-awareness-training program according to sequential studies and relative works. This program is going to be conducted on the regular

semester base and includes 16 to 18 sections in four stages: beginning, learning-by-doing, terminating, and evaluating stages. Basic concept and knowledge are grounded at the beginning. To enhance thinking and enrich experiences through vary homework assignments, including both cognitive and experiencing aspects. The program encourages students to share and discuss, as well as participating exercises for better comprehension. In order to consolidate learning effects, learning journal and term paper are used at the end of program. Finally, evaluation process is suggested to ensure program effects.

Although continuing studies and evaluation are necessary, the most important point is that counselor-educators should be more aware of the meaning and worthiness of self-awareness and willing to conduct training. To the author's knowledge, many graduate students in counseling and counseling professionals in Taiwan are now starting doing related research. Some counselor-educators are concerning seriously to do self-awareness training for counselor-students. Finally, to develop a supervision model cored by self-awareness is the author's next try.

# TRAINING COUNSELORS TO RELATE IN A GLOBAL COMMUNITY USING THE STRUCTURED INTERVIEW PROCESS

by

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## Introduction

Many students have not had significant experiences in interacting with, and communicating with people from different backgrounds (D'Andrea & Daniels, 1991). Thus, many students may have a significant impediment to overcome in order to open themselves to the cross-cultural experience of their future clients. The purpose of this research is to assist counseling students to improve cross-cultural communication skills that would enable them to use interviewing techniques with individuals from diverse cultures. This approach is open-ended with continual opportunities to refine and enhance skills of students, building on the demonstration videos of previous students.

## Project Objectives

Specific objectives were identified for this project. They included the following: 1) develop skills in cross-cultural interviewing among counselors, teachers, and others, 2) develop communication skills between and among people from different cultural backgrounds, 3) present opportunities for interviewees to express their concerns as they attempt to adjust to the dominant culture, 4) provide an arena for dialogue between people from diverse cultures, and 5) develop demonstration videotapes of cross-cultural interviews to be used in a variety of settings where cross-cultural concerns are evident (Kasambira & Rybak, 1996).

## Develop Cross-Cultural Interviewing Skills

Evaluating the effectiveness of comprehensive multicultural training courses, D'Andrea, Daniels, and Heck (1991) found, in general, that the courses did help students to increase their levels of multicultural awareness, knowledge and skills. Merta, Stringham, and Ponterotto (1988) described a cross-cultural experience that was processed in a class setting as valuable in increasing counselor sensitivity to other cultural perspectives. Anderson and Cranston-Gingras (1991) reported on a relatively brief program in which multicultural awareness can be developed. Yet, the need for quality therapeutic approaches which help guide counselors in overcoming cross-cultural obstacles has been identified (Berg-Cross & Zoppetti, 1991). This research was directed toward developing a clear blueprint for assisting students in refining their multicultural communications abilities.

## Develop Cross-Cultural Communication

Mack et al. (1997) conducted a study of campus ethnic climate relations and found differences among ethnic group perceptions. Blacks tended to experience the interracial campus climate as hostile while, in general, Whites held a more positive perspective. The study also found that Asians were the least comfortable in cross-cultural situations while Latinos and

Whites were the most comfortable.

### **Expressing Acculturation Concerns**

Persons making a transition from a home culture to a less familiar culture experience considerable stress in learning to adapt to alien norms and expectations (Zapf, 1991). Where learning a new language of the host culture is involved, the interview session presents an opportunity for the interviewee to practice conversational skills with someone who is willing to take the time to listen, to probe for meaning, and to understand.

### **Provide Arena for Diversity Dialogue**

Berg-Cross, Starr, and Sloan (1993) remarked on a trend toward divisiveness and animosity among racial and ethnic groups on college campuses in the United States. These authors suggested that corrective interventions must include the identification of intergroup commonalities as well as a respect for differences. Ultimately, a polycultural identity may be forged by individuals so they are able to relate meaningfully to others of various backgrounds. Through this process, the individual's human tendency toward a false sense cultural specialness (Hoare, 1991) is challenged.

### **Develop Demonstration Videotapes**

Instruments such as the Cross-Cultural Competency Inventory-Revised (CCCI-R) (LaFromboise, Coleman, & Hernandez, 1991) have been developed to assess the cross-cultural competence of counseling. Demonstration videotapes offer students a chance to critique the cross-cultural interviews of others and themselves.

### **Procedures**

The project developers structured this research using procedural steps which appeared to work effectively. The procedural steps included: 1) identification and recruitment of interviewers and interviewees, 2) meet with and explain procedures to all participants as one group, 3) conduct videotaped interviews in pairs, 4) frequently review and discuss results as a group, and 5) modify techniques to refine cross-cultural communication skills.

### **Recommendations**

As a result of this work, eight specific recommendations are offered for replicating this effort. These recommendations include: 1) begin with skilled or advanced-level counselors, 2) seek out underserved populations, e.g., international students, and other individuals from culturally and ethnically diverse backgrounds, 3) vary the composition of the interviewer-interviewee pairs, 4) keep notes of each group meeting as records of the proceedings, 5) conduct frequent meetings of current participants, 6) critique candidly the videotaped interviews with all participants partaking, 7) provide/recommend resource materials such as Culturgrams (David M. Kennedy Center, 1993) and videotaping facilities, 8) make sure all equipment is available and in good working condition to avoid frustrations.

### **Results**

The final result of this project is to provide resources for counselor educators who are involved in preparing counselors sensitive to the dynamics of cultural differences and able to



work with those differences. Additionally, interviewers not only gain an opportunity to learn more deeply about one or a few other cultures, but they also develop more generalizable skills in learning how to work with cultural differences. They were afforded an opportunity to begin developing self-confidence about dealing with cultural differences along with the newly acquired counseling tools. Throughout this project, a lower level of self-defensiveness and an increased openness to feedback were encouraged as model for increasing both self-awareness and usable skills for counselors.

Other results include an increased sensitivity to concerns of individuals who are in a minority status. Ways of addressing those concerns can then be developed, e.g., psychoeducational and support groups to address the issues particular to diverse groups of people.

### **Implications**

Results from this research could be used for purposes such as: 1) provide counselor inservice training activities, 2) curricular improvement of multicultural or multiethnic education courses, 3) orientation programs for American host families of international students, 4) international student service offices training activities, 5) incoming college professor and instructor orientation programs, 6) student activities orientation programs, 7) for new and transfer student orientation activities (university experience courses), and 8) staff development, e.g., university, education, human service agency, industry, and government.

### **Conclusion**

The structured interview process described offers an integrative, flexible, and developmental model for enhancing cross-cultural communication. The model offers the possibility of involving counselors in training and others at all levels of experience. For example, even though novice counselors were not used in the early stages of development of this model, they could easily take part in live observation, operation of video equipment, and participation in the critiques of completed videotaped interviews.

Future research and experiences with this model may show its degree of efficacy for various populations and particular contexts. The model is very much based on a practice, evaluate, modify/improve feedback cycle for a given situation. Additional research may help point the way to further refinements and best use of the model.

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## **A Descriptive Approach on Career View**

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Rationality has long been the tradition in career literature. All of the founders of substantial career theories, such as Super, Holland, and Krumboltz, have placed great importance on being rational (Spokane, 1996). The majority of career-planning books recommends consistently the virtue of being systematic and logic (i.e., Crites, 1981; Gysbers & Moore, 1987; Katz, 1993; Peterson, Sampson, & Reardon, 1991).

Along the mainstream of rationality, diverse voices have come out here and there (Krieshok, 1998). Some researchers began to view the rational approach as prescriptive and try to find out the real decision-making process in everyday life. The first significant attempt was made by Tiedeman's study on individualized career development in the 1950s, followed by Dinklage's study on decision-making styles in the 1960s (cited in Sharf, 1992) and subsequent studies in the 1970s and 1980s (i.e., Arroba, 1977; Rubinton, 1980).

The reflections on the rationality tradition seem to be limited to the area of career decision-making only. To broadly describe how people actually think and do about their career, the researcher has conducted two preliminary studies (Liu, 1996, in process). Data of those studies were collected from 12 graduate students and 14 undergraduates, respectively. Content analyses of those career view papers resulted in the refined Career View Framework.

Although the model was comprehensive, a whole picture of college students' career review was not available due to the small sample size of previous two studies. This study attempted to describe the general phenomenon about career view in a larger scale. This study was also intended to further define possible heterogeneous groups on career view. Holland's typology was chosen because his types represented not only vocational traits but also integrative personality types (Spokane, 1996).

In sum, this study examined the following two questions: (1) what was college students' career view in general? and (2) what were the differences on career view among six Holland types?

### **Method**

#### **Subjects**

The targeted population was college students in Taiwan. Cluster sampling was applied with stratification of school type (public vs. private), type of department (determined by first letter of Holland code derived from the Interest Inventory by Chin, Lin, Chen, and Ou in 1994), and grade (1 to 4).

A sample of 824 students in 8 universities was obtained. Of these respondents, 246 were freshmen, 243 sophomores, 145 juniors, and 190 seniors. According to the self-rating, 135 were realistic (R), 136 Investigative (I), 176 Artistic (A), 214 Social (S), 109 Enterprising (E), and 49 Conventional (C).

#### **Measures**

The Career View Questionnaire was constructed based on the refined Career View Framework

(Liu, in process). The Questionnaire consisted of three parts. The first part collected demographic information, including sex and age. The second part was about career view, including 23 process items and 15 direction items rated on a polarized 6-point Likert scale. The statements of items were derived from papers in the preliminary study (Liu, in process) and revised by the researcher and two experts. Here was the sample item.

Life is under one's	1	2	3	4	5	6	Life is out of one's
control; one should try							control; one should be
hard to make control.							content with what one has.

The third part was the self-rating on Holland type. Descriptions of the six types were derived from Holland's summary (Spokane, 1996) and Interest Inventory (Chin, Lin, Chen, & Ou, 1984), which were revised by the researcher and two experts. The respondents were asked to choose the most similar type.

### **Procedure and Data Analyses**

The Questionnaire was administered in a group form. The procedure took about 15 to 30 minutes. Data analyses were processed with the SPSS for Windows 7.0. Means and standard deviations of the whole sample were used to answer question one. For question two, multivariate ANOVA were applied. As the significant type effects were found, corresponding univariate ANOVA were conducted, and would be followed by Scheffe post hoc tests if appropriate. The above analyses were examined at the significance level of .05.

## **Results and Discussion**

### **Career View in General**

The means and standard deviations on career view were presented in Table 1 and 2. The means below 3 or above 4 were considered as attitudes supporting the corresponding polarization description because 3.5 was the mid-point on the 6-point scale.

The sided means revealed the following characteristics in college students' career view: (1) survival policy: pursuing control, (2) interaction policy: balancing competition and cooperation, (3) decision-making style: the self-determined and rational approach, (4) actualization principle: clear but not fixed directions and plans, (5) actualization strategy: the active but safe approach, (6) coping with uncertainty: acceptance and preparation, (7) coping with frustration: positive attitudes, (8) origins of life meanings: self-determination and responsibility, (9) retrospective approach: the focus on subjective feelings, and (10) life goals: individualized and multiple divergent goals.

Table 1 Pooled means and type differences on process items

Dimension/Item	Pooled		ANOVA		Homogeneous Groups
	Mean	SD	F	P	
<b>Survival policy</b>					
1 Be content with what one has	2.26	1.26	2.20	.05	E-S-A-I-R S-A-I-R-C
<b>Interaction policy</b>					
7 Fight with reality impacts or restrictions	3.18	1.49	1.83	.10	E-R-A-C-S-I
8 Cooperate with others	4.1	1.3	2.9	.01	
<b>Decision-Making Style</b>					
15 Follow others' opinions or fate	2.06	1.01	2.23	.05	E-A-S-I-R-C
16 Rely on intuition	2.14	1.02	.89	.49	
17 Emphasize outside conditions	2.66	1.24	.37	.87	
18 Make decisions later	2.06	.89	1.43	.21	
19 Overhaul and revise previous decisions	4.6	1.3	1.5	.18	
<b>Actualization Principle</b>					
9 Have a concrete plan	3.79	1.58	1.03	.40	R-C-S-E-I-A
10 Renew developing directions constantly	3.00	1.32	3.26	.01	
11 Don't have to have clear goals all the times	2.03	1.07	3.42	.01	E-S-R-A-I-C
12 Point out developing directions	2.94	1.53	1.39	.22	E-C-S-R-A-I
13 Plan while coming to it	3.29	1.46	2.27	.05	
14 Make future life better	4.2	1.4	.5	.72	
<b>Actualization Strategy</b>					
20 Go for the goal and spare no effort	2.26	1.09	1.51	.19	C-R-I-E-S-A A-E-S-R-I-C
21 Search for or create opportunities	2.86	1.22	6.06	.00	
22 Carry on conservatively	3.63	1.51	15.75	.00	
<b>Coping with Uncertainty</b>					
3 Circumstances will change	2.96	1.41	.58	.71	A-E-S-I-R-C C-I-R-A-S-E
4 Be bad to be variable	2.49	1.08	4.16	.00	
5 Have everything prepared	4.52	1.35	2.40	.04	
6 Think of the best result first	2.6	1.2	2.4	.04	I-R-E-A-S-C
<b>Coping with Frustration</b>					
23 Trial and frustration are challenging	4.88	1.03	2.63	.02	C-R-I-E-S R-I-E-S-A
24 Stand up to frustration persistently	3.31	1.42	1.21	.30	

Table 2 Pooled means and type differences on direction items

<u>Dimension/Item</u>	<u>Pooled</u>		<u>ANOVA</u>		<u>Homogeneous</u> <u>Groups</u>
	Mean	SD	F	P	
<b>Origins of Life Meanings</b>					
2 Life duties are selected by oneself	3.78	1.54	.98	.43	
25 Carry out the mission assigned	2.44	1.29	.39	.86	
26 Actual behavior is more important	2.58	1.31	.58	.71	
<b>Retrospective Approach</b>					
27 Outcomes are more important	2.30	1.30	4.04	.00	A-S-I-R-E-C
28 Current living quality is more important	2.89	1.25	1.06	.38	
29 Try the best to be excellent and perfect	2.43	1.26	1.72	.13	
30 Satisfaction can be evaluated rationally	2.41	1.32	2.63	.02	A-E-S-R-I E-S-R-I-C
31 To achieve life satisfaction is not hard	3.35	1.47	2.70	.02	C-R-I-A-E-S
<b>Career Goals</b>					
32 Fulfill the expectations from cared ones	2.77	1.31	1.42	.21	
33 Let go and chase for whatever one wants	3.43	1.54	6.15	.00	C-S-I-R-E-A
34 Keep stable and conservative	2.49	1.19	8.58	.00	A-E-S-I-R-C
35 Live an ordinary and smooth life	2.88	1.27	9.32	.00	A-E-S-I S-I-R-C
36 Look for comfort and happiness	3.94	1.42	5.65	.00	E-C-A-I-R-S
37 Develop different goals subsequently	2.90	1.52	1.70	.13	
38 Live a relaxing and simple life	3.22	1.36	4.73	.00	E-A-S-I A-S-I-R-C

In comparisons with the prescriptive view derived from career literature, college students' view was found to be substantially different. The only similarities lied in survival policy and decision-making style. As to the rest parts, the major differences were the followings. (1) They showed more willingness to cooperate. (2) They asserted the motivating value of planning but didn't place too much emphasis on details of planning. (3) They liked to be active but cared about security as well. (4) They reflected more on themselves and viewed the uncertainty in a positive way. (5) They faced difficulty in a positive way. (6) They addressed the selection about attitudes toward life instead of life duties themselves. (7) They didn't insist to have control although they did pursue control. (8) They tried to find the golden middle way between want's and should's. In sum, they tended to combine different approaches and balance opposite values. They certainly asserted the value of rationality, but they were also concerned about other values.

### Career View of Six Holland Types

A multivariate ANOVA of 23 career view process items resulted in Wilk's  $\lambda=.76$  ( $F=1.87$ ,  $P=.00$ ,  $ES=.05$ ). Corresponding univariate ANOVA indicated significant differences on 12 items, but heterogeneous groups were identified for two items only (Table 1). Compared with the E, the C placed more emphasis on the attitude to be content with what one has. Compared with the A, the C had more negative feelings toward frustration.

A multivariate ANOVA of 23 career view direction items resulted in Wilk's  $\lambda=.79$  ( $F=2.49$ ,  $P=.00$ ,  $ES=.05$ ). Again, corresponding univariate ANOVA and Scheffe post hoc tests identified heterogeneous groups for three items only (Table 2). Although the C didn't expect to have a checklist about satisfactory life, they didn't address subjective feelings to the extent the A did. The C enjoyed a relaxing and simple life, while the E prefer a busy and enriched life. Both the A and E like a life full of excitement and variation more than the C and R.

It was noteworthy that there were 15 items showed significant main effects on univariate ANOVA but failed to identify heterogeneous groups with post hoc tests. However, an inspection on means of six types revealed a consistent pattern. The C was found to have the largest or smallest means in 11 of the 15 items, and the second largest or smallest in 3 of the rest items. This clear pattern indicated there might be substantial but not significant type differences undetected.

To put together, the above comparisons showed the C was quite different from the other types, while the A and E were the most opposite types to the C. Moreover, the pattern of differences on career views among six Holland types was in congruence with previous studies on the characteristics of the Holland types (Spokane, 1996).

Further attention was placed on the similarity between each Holland type and the prescriptive view. No type was found to be consistently more congruent with the prescriptive view than other types, which seemed to indicate the lack of association between Holland's typology and the preference toward rationality.

## Conclusion

College students' career view was more moderate and divergent than the prescriptive scholastic view. Rationality was not their only important value. Differences on career view among six Holland types were found, with the pattern congruent with the Holland typology. Such findings might indicate the association between vocational interest and career view. There was no association between Holland's typology and rationality on career view.

The findings were restricted by two major limitations of this study. The first limitation raised from the research instruments. The mid-point of the 6-point scale might not be the true mid-point. Therefore, the findings of less importance on rationality could be attributed to the biases of scaling as well as the true differences between the college students' career view and the prescriptive view. Similarly, the noticeable low ratio of the C might indicate the inappropriateness of the Holland-type item as well as other possibilities, such as sampling biases or the respondents' resistance to stereotyping.

Another limitation was related to cultural differences. Taiwanese career literature has a root in the US. The observed differences in this study could be cultural differences rather than the prescriptive vs. descriptive ones.

Despite of those limitations, the existence of various types of career views has been confirmed. Needs of individualized career theories and practice are in call. Career counselors should be sensitive to ones' own career view as well as the clients'. The Career View Framework and Questionnaire are helpful in doing so. Special attention should be paid to avoiding abusing rational approaches simply due to the counselor's familiarity and comfort. Secondly, the association between Holland's typology and career view is promising. They can be used to clarify each other during counseling process.

Future research could be directed to improve the psychometrical qualities of the measures on career view. Moreover, it would be of great value to examine college students' feelings toward

their career views and corresponding perception of the instrumentality.

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# RELATING AUTHENTICALLY IN A GLOBAL COMMUNITY: A PROCESS OF PERSONAL TRANSFORMATION

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What is needed most are affective experiences designed to humanize counselors...Few counselors ever ask what they can do to change themselves; few want to know how they can become better human beings in order to relate more effectually with other human beings who, through the accident of birth, are racially and ethnically different. (Vontress, 1976, p. 62)

More than 20 years after Vontress made this statement, we believe that its critical elements--*counselors [and counselor educators] being open to changing themselves via affective experiences* in order to relate more effectually with persons who are racially and ethnically different from themselves--are the key for relating genuinely and empathically in a global community. In this paper, our goal is to begin to examine the process of change, which includes internal affective and cognitive elements, leading to new perspectives, cognitions, and behaviors in regards to our attitudes toward and relationships with others who are ethnically and culturally different from ourselves. While most of the literature has focused on *counselor* competencies and counselors-in-training, we emphasize the necessary lifelong development of *counselor educators*, as they are the role models for their students and trainees.

This paper will focus on an examination of this complex and multifaceted process, including how we are motivated to be engaged in it. We will utilize the Multicultural Counseling Competencies (MCCs) (Arredondo & D'Andrea, 1995) as the standards by which to begin our discussion, and Robert Kegan's (1982, 1994) constructive-developmental theory of meaning-making as the framework for examining the process of change. This paper is written from the perspectives and experiences of two White women of middle and upper middle class backgrounds from the United States, and we look forward to discussions of this change process

with persons from cultural and class backgrounds different from our own.

For over 20 years, much has been written about the need for counselors to become "culturally aware" and "culturally sensitive" in order to work more effectively with clients from different cultures and ethnicities. In most cases, this has meant that counselors were aware of and sensitive to the differences among various racial and ethnic groups, and specific counseling strategies and interventions that might be most effective with clients from a certain group. The profession's focus was on the counselor's--and especially white counselors--"knowledge of" and "sensitivity to" the *differences of the others*. Little attention, if any, was given to the counselor's awareness of his or her own ethnicity and cultural background, and the implicit assumptions, biases, and worldview inherent therein. And, as stated by the National Advisory Mental Health Council (as cited in Pedersen, 1997, p. 26) "the level of cultural self-awareness among counselors has been demonstrated to be low". These findings corroborate our own experiences and those of our counseling students, most of whom are White and, until their entry into a graduate counseling program, view themselves as "Americans" and with little or no sense of ethnic nor racial heritage or influence, nor of the privilege and racism--often unconscious and unintended--that pervades the dominant culture, including the counseling profession.

More recently, there has been a growing movement to specify and endorse competencies for effective multicultural counselors. The Multicultural Counseling Competencies (MCCs) represent one well-articulated and defined set of standards to inform our intellectual understanding of diversity and to provide direction for training effective counselors and counselor educators. It has been recognized that a necessary, although not sufficient, first step is for counselors to have awareness of their own cultural heritage and its inherent values and biases, particularly in regards to psychological and counseling processes, and how their work as counselors with clients of different backgrounds might be affected--for better or for worse. The MCCs go beyond this initial step of self-awareness of cultural heritage and include objectives that address counselors' abilities to: "possess knowledge and understanding about how oppression, racism, discrimination, and stereotyping affects them personally and in their work"; "acknowledge their own racist attitudes, beliefs, and feelings"; and constantly seek "to understand themselves as racial and cultural beings (who are) seeking a nonracist identity." Under "Counselor Awareness of Client's Worldview, the MCC includes: "Culturally skilled counselors are aware of their negative emotional reactions toward other racial and ethnic groups that may prove detrimental to their clients in counseling." Based on our own personal experiences and observations of our students and colleagues, competencies such as the latter are much more difficult and painful to "achieve"; in fact, to us, they embody the work of a lifetime.

As written, we suggest that most, if not all, of the MCCs fall within Kegan's (1982, 1994) third order of consciousness in that they provide operational definitions for cognitive (and in a few competencies, behavioral) measurement. Kegan's third order of meaning-making describes a self that is defined by and embedded in external expectations, which, in one sense, the MCCs represent. However, our interpretation of the MCCs authors' intent or spirit behind the competencies is that, ultimately, one would be able to personally internalize--affectively and cognitively--the various awarenesses, knowledge, and understandings stated in the MCCs. We further suggest that in order to do so, one needs to be moving toward Kegan's fourth order of

consciousness. These competencies (e.g., the awareness and knowledge of one's values, assumptions, feelings, biases, etc.), at Kegan's fourth order of consciousness, would be utilized as the basis for a dialogical relationship with them; to use Kegan's terms, one would be able to view the internalized competencies as the "object" of one's own self-reflections. The outcome of this inner dialogue is a way of being that is manifested in one's deportment and interactions with others. Thus, counselor self-awareness as a cognitive objective is a prerequisite for multicultural competence; but, ultimately, to become "the better human beings" that Vontress describes in our opening quotation, we posit that one needs to develop a self-awareness that is deeply and affectively integrated into one's sense of self and that manifests itself through relationships in ways that are not easily operationally defined and quantified.

While the MCCs have been stated as goals or objectives, we view them as being actualized on a continuum that involves different levels of consciousness. Thus, we are in a continuous process of developing our competence as effective multicultural counselors. We find Kegan's constructive-developmental theory about the evolution of consciousness and meaning-making useful as a framework for describing the internal shifts and affective and cognitive changes as one moves from the third to fourth order of consciousness in terms of the MCCs. Development from one order of consciousness to another involves a very gradual qualitative, nonlinear transformation in the ways one perceives the world, constructs knowledge, and relates to relationships with others and oneself. This process paradigm is supported by Sue (1997) as he contends that "multiculturalism is truly postmodern and social constructionist in character" (p. 8). We emphasize that this process is a lifelong journey that requires continual attention and work.

In addition, Sue (1996) postulates that multiculturalism means "change" at all levels, individual, organizational, and societal levels. Change is often painful for individuals, organizations and societies. In support of this perspective on change, Corey and Corey (1993) report that to be a more actualized person, one may be able to increase cognitive awareness, but the intellectual enlightenment does not translate easily to feeling and behaving differently. Dalton (1995) further differentiates the aspects of change by stating that as we struggle to ameliorate profoundly distressed relationships that are the product of a troubled world, we often begin to change our behavior, but our attitudes, beliefs and emotions rarely catch up.

We suggest that the multifaceted development towards the fourth order of consciousness in terms of authentic and effective multicultural relationships is an especially difficult and painful process. We concur with Sue's (1997) belief that the process of increased cultural awareness brings forth images of oppression, privilege and class for individuals, organizations and societies. The more we can identify and work to eliminate our own internalized oppression--which has been a result of our own individual, cultural, and gender experiences--the freer we are to experience other people for whom they are in a truly genuine and authentic relationship. We believe that for all--perhaps most especially for those who are White and privileged--the process means "owning up to painful realities about oneself, our profession and our society. As such it may involve tension, discomfort, and must include a willingness to honestly confront and work through potentially unpleasant conflicts" (Sue, 1997, p. 9).

As we begin to experience painful realities and unpleasant conflicts, the question of "why would anyone who is part of the dominant culture or the possessor of power in society want to change" begins to surface and must be answered. We believe that the answer(s) to this question lie beyond reasons of naive altruism and liberal intentions. For, ultimately, even those of the privileged groups experience, consciously or not, their own internalized oppression, which, as we stated earlier, prevents us from engaging in truly genuine relationships. Our own internalized oppression is linked to global oppression, and, as stated by Mandella (1994): *the oppressor must be liberated just as surely as the oppressed. A man who takes away another man's freedom is a prisoner of hatred, he is locked behind the bars of prejudice and narrow-mindedness. I am truly not free if I am taking away someone else's freedom. Just as surely as I am not free when my freedom is taken from me. The oppressed and the oppressor alike are robbed of their humanity* (p. 544). Further, in support of the position that the oppressors are also oppressed and must be liberated, Freire (1993) states that as the oppressors violate the rights of others, they become dehumanized and void of genuine love and caring for humankind, and as the oppressed fight to be free, they begin to spark humanism in the oppressors: *"It is only the oppressed who, by freeing themselves, can free their oppressors. The latter as an oppressive class, can free neither others nor themselves* (p.38).

While the above discussion focuses on our personal and internal motivations, there are also external demands that can function to motivate us to engage in this process of change. Even as early as 1949, Ouspensky referred to this type of change as necessary for the survival of humanity. We now live in an increasingly complex world with geographical distance and isolation no longer barriers, and there is an increased external demand to become more responsible global citizens. In addition, for those in the field of counseling, this is a professional demand--as evidenced by the Multicultural Counseling Competencies, for instance--that can serve as an external motivation for changing the way we view ourselves and others in order to be effective multicultural counselors.

Let us now return to a more detailed discussion of the process of change in terms of transforming ourselves from the third to the fourth orders of consciousness (meaning-making) in regards to our functioning as effective multicultural counselors and counselor educators. The process involves gradual shifts in the way we perceive and make meaning of ourselves and our relationships to others. As we move toward functioning in the fourth order, we begin to identify and reflect upon those values, assumptions, and biases inherent in our third order sense of self (identity) and which have emanated from our ethnic and cultural heritages. This entails aspects of the process of change articulated by Ouspensky (1948), a process involving the discovery of meaning and values and how they impact our identity as a person. Rather than being embedded in our cultural identity and defined by its beliefs and values, we can view them as "objects" that we can now consciously decide to retain or not. Thus, we begin to have values about our values, and relationships to our relationships. Particularly in regards to attitudes, assumptions, and behaviors involving persons from different cultural and ethnic backgrounds, this shift in awareness and perspective can be quite painful, and a "retreat" to our third order sense of identity can seem comforting. In a sense, while shedding the personas of our third order way of being and the safety of our cultural embeddedness, we are beginning a self-directed journey with personal responsibility for ourselves and a nucleus or soul that can feel alarmingly alone. The impulse to return to or maintain our third order self or identity--with characteristics of values, morals and ethics based on group, family and cultural imperatives, norms, and assumptions of others--can be exceedingly strong. However, to retreat into the third order of consciousness is to hinder the process of becoming our authentic selves. The "work" of transforming ourselves toward the fourth order of consciousness is to tolerate the ambiguity of the isolated self while examining previously held assumptions and integrating only those that we choose to retain. We can even begin to appreciate the ambiguity as we reflect upon who we are and who we wish to become. This is the "inner dialogue", (which we mentioned earlier in this paper), wherein we think about how we think about beliefs and values we hold about who we are in the global community. As we continue this internal dialogue, we amass conscious energy about our willfulness to develop a whole, integrated authentic self and a vision of ourselves in the global community.

According to Kegan (1982), this dialogue within and about oneself is the basis for the transformation from the third to the fourth level of consciousness and involves three "functions": confirmation, contradiction, and continuity. The process of making and integrating new meaning at the fourth order of consciousness involves confirming what attributes and self-defining characteristics will continue to serve oneself at the fourth level, what resistances emerge that interfere with self-authorship, and what ideals energize and nourish the self at the fourth level. We believe Kegan's process is analogous to a process described by Gurdjieff (as cited in Nicoll, 1996) as a "Law of Three" wherein what we confirm opposes our contradictions and what results is the continuity or reintegration of ourselves. Similarly, Freire (1993) stated that a dialogue (process) must include reflection and action. While reflection (confirmation) and action (continuity) appear to be dichotomous, they in fact create a dissonance (contradiction) that provokes reflection and then activism (continuity). While Gurdjieff applied his theory to cognition and Freire to educating about oppression, their outcomes seem analogous to Kegan's three functions (confirmation, contradiction, and continuity). Ultimately, the outcome is a reintegration, which allows us to engage in self-authorship and no longer look to others to define ourselves. Only then can we accept each other, as the more we truly know ourselves and the



more we can see the relationship we have with ourselves, the more we can value ourselves from a fourth order perspective, and the more we can value others in the same way, even when they are different from ourselves.

This self-directed journey can be best accomplished with the support of teachers and mentors, among others, but the work itself must be done alone. While the change process can be exhilarating, it can also be painful. As we have discovered through our own experiences and the observations of and self-disclosures of our counseling students, there are times of greater growth and periods of stasis. Continual attention and ongoing work is needed for us to internalize and actualize our embodiment of the MCCs in a genuine, authentic manner.

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## What Exactly Is A Family?

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### Introduction

Ask anyone to tell you who is in their family and they will inevitably give you a list of individuals. Ask the next person the same question and you will, most likely, get a different answer. And yet, we all know what - and who - is family. Are do we? "We all have our conceptualization of our own family and at the same time we believe that we know what family is and even what *the* family is" (Levin & Trost, 1992, p. 348). It is this belief that we know what *the* family is that concerns the author in training marriage and family counselors. It is imperative that we as helpers understand the difference in our personal perspective of family - our own and *the* family - and the perspective of others as well as the difference in personal perspective and "scientific knowledge". Beginning to acknowledge these differences is the first step in integrating diversity into our counseling skills.

### What is My Family?

In teaching marriage and family counseling classes I use many exercises to assist students in beginning to understand who they consider to be their family. As Bowen believed, it is necessary to understand our own family of origin before we attempt to work with others. And, although it is not necessary to have solved all our own issues, awareness is certainly an imperative before - and while - counseling others. One exercise that is particularly insightful for students comes from an article by Levin and Trost (1992). In the first class session, before any material has been introduced, I ask students to take a blank sheet of paper and, using circles for females and triangles for males, to draw their family. I also instruct them not to connect these circles and triangles with lines. No further instruction is given. I then allow students approximately 10 - 15 minutes to complete their family map.

After completion, we divide into groups and I ask them to discuss the following questions:

1. Who did you include in your family?
2. Who did you not include?
3. Examine the distance/closeness of the individuals on your family map. What do you think this means? Does this represent how your family functions?
4. Examine placement of members on your map (How the members were placed on the sheet - in hierarchical forms, circle, etc. Who is next to whom? Who is above/below whom?) Does this represent your family alliances?

5. What would the map have looked like a month ago? What might it look like a year from now?

Students always find this exercise to be extremely enlightening. They are amazed at whom they included or excluded and how this "simple" exercise provides a great deal of accurate information about their family functioning. The other insight that comes from this exercise is the recognition of the different family forms that emerge. Inevitable multiple forms of family are presented in this exercise, allowing students to understand that each person's perspective of family is different.

Student participants are usually very open and candid about their families in this exercise. It is important, therefore, to preface any self-disclosure exercise a caution about confidentiality. My students are asked to use the same criteria for their class discussions as they would with clients, e.g., any information gained in class stays in class. This exercise, as do many other self-disclosure exercises, places the instructor in the position of modeling good ethical and professional behavior. As role models, we need to model the openness that we ask of students as well as being cautious of judgmental remarks or actions. One way to model openness is to diagram your family on the board for students. This gives positive messages about self-disclosures, acceptance, and being open without sham (Levin & Trost, 1992).

What is *The Family*?

The next step is to discuss what is theoretically meant by family, or what constitutes *the family* (Trost, 1988, 1990a, 1990b). As previously discussed, individuals have many different conceptualizations of family but we also have a more or less generalized concept of family (Gubrium & Holsein, 1990). This general concept may be based upon theory, social reality, normative ideas, or legal constraints. However, no consensus exists for this definition. One suggestion for beginning a congruent definition is to start with the spousal or cohabitation unit and the parent-child unit (Trost, 1988). With these two definitions, family could be defined as a "social group consisting of at least one parent-child unit or at least one spousal [or cohabitation] unit" (Levin & Trost, 1992, p. 350).

The idea of using dyadic pairs to define family would mean that one could analyze any sort of family-like group. This definition allows for friends, aunt-niece, grandmother-grandchild, cousin dyads, and so forth. Almost any sort of dyadic pairing could then be defined as a family. Household is sometimes synonymous with family. In this case (and seen in the survey results) moving out of the household as in cases of divorce would be to leave the family (Isaacs & Levin, 1984).

In order to gain a better understanding of what constitutes *the family* a variety of populations were sampled using the survey developed by Levin and Trost (1992). They originally distributed the survey to 1,500 men and women ages 20-59 in the Uppsala province of Sweden. I have subsequently distributed the survey to students in the counseling psychology and counselor education program in a western American graduate school, pastoral counselors, counselors attending an international counseling conference, and students at the University

Kebangsaan Malaysia. The data gathered from these surveys are presented in Table 1.

Several particularly interesting findings emerged from these surveys. The first finding was that American student participants tended to define family in relationship to the appearance of children in the household. This distinction did not hold true in the other populations. Another interesting distinction came from the pastoral counseling group. This group tended to define family by blood ties that inhabit the same physical structure. Also, this group more clearly defined family within the context of the religious and/or legal constraints of marriage, which disallowed cohabiting couples to be defined as family. This was not, however, unanimous but was a majority response. In contrast, the Malaysian students overwhelmingly defined family within the context of their religious and cultural beliefs. Only those individuals who are related by blood or marriage are considered family, and the responses were highly cohesive. Also, household, or living in the same residence, did not seem to be a defining factor. In fact, several students commented that they did not understand the necessity for the question - which provides a much stronger idea of their belief system than does the data.

## Conclusion

It is essential to understand the concept of family in this global and diverse society in which we now live. Counseling with clients from different countries is becoming more common as the world continues to "shrink". Also clients within our own country of origin may have a culture that is different from our own.

This article presents a method to assist students in becoming aware of their own idea of family as well as a tool to use with clients in order to determine their definition. Last, the article presents a scholarly means of determining what the concept "family means in theoretical terms. Continued examination of this concept with various populations and cultures is recommended.

Table 1  
Percent Who Classified Example as Family

Question	Student Counselors Pastoral		Intl Counselors Malaysians	
One	96.2	96.1	96.2	98.9
Two	100.0	100.0	100.0	100.0
Three	98.9	100.0	98.3	98.8
Four	83.9	90.8	80.3	90.4
Five	41.6	33.6	45.9	96.2
Six	79.6	82.2	78.3	97.4
Seven	96.2	95.4	96.6	24.6
Eight	66.5	65.1	67.2	18.6
Nine	62.2	68.4	59.0	22.1
Ten	87.3	94.1	83.3	15.4
Eleven	53.6	50.0	55.5	94.6
Twelve	84.4	87.5	82.8	92.8
Thirteen	91.6	90.1	92.4	15.4
Fourteen	59.3	63.2	57.2	16.5
Fifteen	70.6	72.4	69.7	12.5

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The Influence of Attributions on Evaluation of Marriage  
for Spouses in Taiwan:  
Implication for Marital Counseling

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### Introduction

In the measurement of marital and family relationships, there have been discussions regarding whether insider or outside perspectives best represent reality (Olson, 1977). It has been suggested that combinations and the development of both measurement approaches probably would be the best way to understand the complexity of dyadic and family relationships (Olson, 1977). Recently, however, outsider perspectives in the study of marriage have seemed particularly powerful in predicting marital satisfaction. Results from observational studies have consistently documented that patterns of communication, e.g. withdrawal and defensiveness, are valid predictors for short-term and long-term evaluation of marriage (Gottman, 1994).

However, insider perspectives, such as how people think and feel in their marriages, are still important. For example, thought processes have been found to be important, as in the finding that distressed and nondistress couples make different attributions for positive and negative events in marriage. Distressed couples tend to see negative events as external locus of control, stable and global, whereas nondistressed couples tend to attribute negative events as internal locus of control, unstable, and specific (Fincham, & Bradbury, 1990; Fincham, & Bradbury, 1992; Thompson, & Snyder, 1986).

In contrast to the Western researches which focus on the dyadic interaction, most of the marital researches in Taiwan emphasize on career women's marital adjustment, with some care for sex roles, power and social support. Either the communication behavior or the internal cognitive process during interaction has

not been understood. The influence of behavioral communication patterns on marriage may be varied in different cultures, but the internal cognitive processes may not be. Therefore, the purpose of this study is to investigate whether any of the attribution styles would predict current evaluation of marriage for spouses in Taiwan.

## Method

Data were collected in the northern, central, and southern regions of Taiwan, and included 235 wives and 227 husbands. Respondents were mailed two sets of materials with postage-paid return envelopes and a cover letter. Demographic characteristics of the sample are presented in Table 1. The average age was 37 years old, and the average year of marriage is 9.37 years. Majority of the respondents were college graduated.

The Relationship Attribution Measure (RAM) (Fincham & Bradbury, 1992) was used to assess attribution styles. The RAM contains four hypothetical events (e.g. your husband criticizes something you say), and for each stimulus event respondents indicate their degree of agreement with six statements on a 6-point scale, ranging from strongly disagree (1) to strongly agree (6). Three of the six statements were used to measure causal attribution, and responsibility attribution, respectively. For causal attribution, respondents were asked the extent that the cause of the event rested in the partner (locus), was likely to change (stability), and affected other areas of the marriage (globality). The three responsibility attribution items assessed the intentionality of the act, its motivation, and whether the partner was blameworthy for his/her action.

The Quality of Marriage Index(QMI) (Norton, 1983), a six-item measure, was used to evaluate the subjective perception of marital quality. For five statements, respondents were asked to indicate level of agreement ranging from very strongly disagree (1) to very strongly agree (7). The sixth item requires a global rating of marital happiness ranging from very unhappy (1) to very happy (10).

## Results

Intercorrelations among attribution styles (Table 2) in this study were stronger than was expected, considering the correlations reported by Fincham and Bradbury (1992). Table 3 shows the correlations between attribution styles and marital quality. Multiple regression analyses were used in order to learn the effects of



attributions on evaluation of marriage. The six attribution styles were included in the analyses. The results indicated that, for husbands, intentionality was the most predictive factor, followed by motivation, for their marital satisfaction. The two factors accounted for 58% of the variance of husbands evaluation of marriage. For wives, motivation and globality were the significant predictors for marital satisfaction. Both factors explained 62% of the variance of wives' evaluation of marriage.

The results indicated that attribution styles were valid predictors of marital quality for spouses in Taiwan. However, the influence of attribution styles on marital satisfaction was different for husbands and wives. For husbands, when they explained the negative reactions as spouse's internal intention and selfish motivation, they tend to feel unsatisfied with their marriage. For wives, however, when they perceived the negative reactions as spouse's selfish motivation and would influence other aspects of their relationship, they would be unsatisfied with their marriage. For both husbands and wives, varied attribution styles accounted for more than 50% of the variance of marital quality, supporting the notion of importance of cognitive process in evaluation of marriage.

## Discussion

These results point a new direction of marital study in Taiwan. What people think makes an important difference in evaluation of marriage. There have not been many studies in Taiwan that have dealt with either communication patterns or internal processes in association with marital satisfaction. Most studies here concern demographic variables and marriage, such as correlates of marital satisfaction for career women, time in job and family, with some studies of sex role attitudes. The results of this study suggest that understanding the attributions spouses have may increase the effectiveness in working with couples.

There were also limitations of this study. First, although there were associations between certain attribution styles and evaluation of marriage, it is not clear which one was the cause. It may also be possible that an unsatisfactory relationship makes the spouses explain things in certain way. In one of their longitudinal studies, Fincham and Bradbury (1993) tried to test the causal relations between attributions and evaluation of marriage. However, they found complicated relations between the two, and different associations for husbands and wives. Therefore, it should be careful when making suggestions for spouses in terms of changing their way of explaining interaction events.

Another limitation is that the results of this study were not dyadic. That is , the results only indicated the association between attribution styles and evaluation of marriages for men and women respectively. However, the effects of different attributions between the husband and wife on their evaluation of marriages remain unknown. From system theory perspective, it is not only the individual attribution styles should be taking into account, but the interaction factor should be emphasized as well. For future studies, the influence of within couple attribution styles on the evaluation of marriage should be investigated.

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Table 1  
Description of Sample

Variables	Husbands ( <u>n</u> =227)		Wives ( <u>n</u> =235)	
<u>Education</u>	<u>n</u>	%	<u>n</u>	%
Less than 12 yrs	1	.4	2	.9
12 yrs	4	1.8	17	7.2
13-16 yrs	188	82.8	198	84.3
17+ yrs	34	15	18	7.7
<u>Occupation</u>				
Homemakers	--	--	20	9.0
Skilled manual workers	1	.5	1	.4
Clerical & sales workers	1	.5	3	1.3
Semiprofessionals	8	3.7	14	6.3
Minor professionals	68	31.0	69	30.8
Lesser professionals	122	55.7	113	50.4
Major professionals	19	28.7	4	1.8
<u>Number of Child</u>				
0	26	11.8	29	12.6
1	42	19.0	46	20.0
2	113	51.0	117	51.0
3	36	16.0	34	15.0
4	4	1.8	4	1.7

Table 2.

Intercorrelations among RAM Attribution Styles for  
Husbands (above diagonal) and Wives (below diagonal)

Attribution Styles	1	2	3	4	5	6
Cause						
1 locus	--	.61	.39	.38	.40	.38
2 stability	.73	--	.56	.56	.60	.51
3 Globality	.39	.54	--	.79	.74	.77
Responsibility-blame						
4 intent	.47	.62	.67	--	.85	.81
5 motivation	.54	.65	.61	.82	--	.84
6 blame	.43	.54	.73	.68	.71	--

Note. All the correlation coefficients were significant at  $p < .001$ .

Table 3

Correlations between RAM Attribution Styles, and Quality of Marriage Index

Attribution Styles	Marital Quality	
	<u>Husbands</u>	<u>Wives</u>
Cause		
locus	-.32	-.40
stability	-.50	-.56
globality	-.61	-.62
Responsibility-blame		
intent	-.63	-.65
motivation	-.66	-.67
blame	-.55	-.56

Note. All the correlation coefficients were significant at  $p < .001$ .

Table 4

Results of Regression Analyses of Attribution Styles on Marital Quality

Criterion Variables	Beta	R-square
	<u>Husbands</u>	
Intention	-.71**	.51
Motivation	-.41**	.59
	<u>Wives</u>	
Motivation	-.74**	.55
Globality	-.36**	.62

Note. \*\*p< .001.

# VARIABLES REALTED TO CAREER SUCCESS: KOREAN-AMERICAN WOMEN OF DISTINCTION TELL THEIR STORIES

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## Introduction

The goal of this research has been to uncover the reasons for the unusual success of a small group in the American work arena. This population consisted of a very select group of Korean-American women whose childhood and formative years were spent in Korea and under the sole influence of Korean culture. Korean culture tends not to nurture some of the significant personal qualities, which do make for success in the American context. Furthermore, the American workplace itself holds for Korean females serious obstacles to success, particularly because of racial and gender discrimination. How, then, have these women succeeded in the American workplace in the face of the dual barriers of debilitating cultural influences and serious obstacles inherent in the workplace environment itself? How is it that they came to possess the unique personal qualities, which brought them to power and influence in the American scene? Because only a few have achieved such success, it was especially significant to uncover the factors which worked for success in these few who may be regarded as role models.

## Research Questions

This study was designed to answer the following specific questions:

(1) Are distinguished Korean-American women similar to American women and men who have distinguished themselves? (2) To what factors do they attribute their success? (3) What career barriers did they encounter and how did they overcome them? This investigation attempted to promote a general understanding of the factors associated with women's career success.

## Subjects

Women selected to participated in this study were Korean-American women who have distinguished themselves in their respective career fields, and who met the following criteria:

1. Women who were born in Korea and came to America during or after high school.
2. Women who are currently working outside the home
3. Women who (a) have made contributions to their fields, or (b) have served or currently serve as an elected official in their professional organization or work settings, or (c) are recognized

by their peers and others as being distinguished, or (d) have held or currently hold high executive positions, or (e) have held or currently hold positions of high esteem and were or are the first Asian to hold such a post, or (f) have earned or are earning an extremely high income and are viewed as being very successful financially.

The subjects were selected from the five major cities in the United States with substantial Korean-American populations (Los Angeles, New York, Chicago, Washington, D.C., and San Francisco). A total of 20 subjects met the above criteria and participated in this study.

## Methods

In this study, both qualitative and quantitative methods were employed. The necessary data was gathered through: (a) structured questionnaires for demographic information, (b) in-depth personal interviews for personal experiences, and (c) administration of the Adjective Check List (ACL) inventory for personality assessment.

For the analysis of the data, demographic information was tabulated, and each transcript was analyzed individually. Statements made by the subjects which were pertinent to the research questions were noted and recorded, temporary categories were developed and a coding system similar to that described by Strauss (1987) were developed and analyzed in order to address the research questions. For ACL personality assessment, means and standard deviation were calculated, and comparisons were made with the general population.

## Findings

### Research Question 1

Based on the review of the literature, compared to the average person, successful American women and men who have distinguished themselves tend to be more intelligent, to have a high need for achievement, to have a high need for power (Williams & McCullers, 1983, Schippmann & Prien, 1989, McClelland & Bburham, 1976), and they possess personality traits typically considered to be masculine, such as assertiveness, competitiveness, dominance, self-confidence, self-reliance, independence, risk taking, and adventurousness (Wong, Kettlewell, & Sproule, 1985, Bachtold, 1976, Bachtold & Werner, 1972, Louis, 1981). It also shows that they have interpersonal skills. (McCall & Lombardo, 1983, Lombardo, Ruderman, & McCauley, 1988, Ansari, 1984). Other variables that seem to be somewhat related to occupational success are level of education, socioeconomic background, early family life, birth order, and the experience of having been mentored. However, the research results with respect to these variables, with the exception of education were inconclusive.

The findings of this study show that the Korean-American women of distinction in this study are remarkably similar to successful American women and men of high achievement. All of the subjects in this study were highly intelligent and very bright. All were honor students and have excellent academic records. Most of them attended the best high schools and the most prestigious colleges and universities in Korea. All received higher education except one who did



not finish college degree due to circumstantial and external factors that prevented her from continuing her education. However, she was a straight 'A' student.

Most of the subjects exhibited the exceptional desire for high achievement. From early childhood, they were highly competitive in their academic performances and wanted to achieve the best. They were highly ambitious, motivated, and achievement oriented. "I have a high standard for myself. I have to be first or in the top, whatever I do. I work hard and I take pride in saying I did the best" was a typical response.

Many subjects played the leader role when they were young, and have been actively involved in various leadership roles both in the past and present. The subjects in this study showed their need for power in many different ways; by being the best, being in control of self and/or being in charge, influencing people and things, having freedom from control by others, making an impact, and making a difference.

Findings of this study, both from the interviews and the results of the ACL, are that most of the subjects exhibited masculine traits. From an early age and on, many of the subjects exhibited more masculine than feminine characteristics. As children, they were very outgoing, confrontive with their parents when treated unfairly, and many respondents described themselves being "tomboys" when they were young.

Interpersonal skills is another quality these subjects exhibited, again congruent with research findings.

The patience and tolerance seem to be more characteristic of Korean-American women of success than American women and men of distinction.

In regards to early family life, most of the subjects experienced a type of child rearing that has fostered their more psychologically masculine sex-typing supporting the findings of Henning & Jardim (1971) and Williams & McCullers (1983), and received much support and encouragement from their parents. Furthermore, the parents of the subjects not only held high career expectations but they also encouraged them to enter nontraditional career fields.

## Research Question 2

Deaux (1979) and Deaux & Frris (1977) found that males tended to credit their success to ability, while females indicated a greater tendency to regard luck as the explanation for either success or failure. Without hesitation, the majority of the subjects largely attributed their success to hard work, to doing their best, and to their dedication to work. As a matter of fact, a few of the subjects who work in government settings resented the idea that their positions might be token ones, and said that they will not tolerate or accept such suggestion. Several subjects included parental upbringing and strong support from husband and children in their success attribute lists. They asserted that, unlike other parents in Korea, their parents held non-traditional and very liberal views of child rearing. Parents not only had high career expectations of their daughters, but they also hoped their daughters would enter nontraditional career fields. Thus, the subjects

said that from early childhood, their parents encouraged and supported them, and instilled in them self-confidence and the belief that they could achieve anything they desired if they were prepared to expend the required effort. This finding is consistent with the findings of Williams and McMullers (1983).

### Research Question 3

Barrier encountered: subjects identified racial discrimination, gender discrimination, cultural differences, and language difficulty as barriers that they had encountered. The most prominent barriers the subjects encountered were racial and gender discrimination.

It is interesting to note that the majority of the subjects reported that being an Asian woman had both a positive and a negative impact upon their careers. And more than half of the subjects reported that they had experienced racial barriers in the beginning stages of their careers, but not necessarily in the later stages. The subjects' responses to racial and gender discrimination ranged from intense anger and frustration to very mild reactions. Societal stereotyping of foreigners and Asians as a career hindrance were mentioned. They expressed that differences in cultural background and language are often perceived by Americans in terms of deficiency. Also cited by the subjects was the perception of Asian woman as timid, shy, and feminine, therefore easily manipulated. It was this researcher's impression that most of the subjects exhibited a feminine and typically Asian female exterior, but that they were tough inside. It was as though they were lambs on the outside but tigers on the inside. Beneath their meek exteriors they were tough and extraordinarily capable and competent people. Many subjects seemed to be saying that people do not take women seriously, especially Asian women. Therefore, being an Asian woman created a double barrier for them. One subject said that the minority status of being an Asian-American woman burdened her with the requirement of having to work twice as hard to earn respect. She referred to this situation as "double Jeopardy." Many subjects expressed that only through hard work could they earn respect for their capabilities, and that they had to prove themselves again and again.

There was another stereotype of Asians mentioned. One subject stated that people perceive Asians as very able and highly intelligent. For this reason, she feels that Asians are intimidating to some who perceive them as a threat to their jobs. Being an Asian woman was both an enhancement to career opportunities and also an occupational barrier. In some cases, being Asian contributed to their career enhancement. The government's affirmative action policy has resulted in the active recruitment of capable and qualified Asians. The paradoxical factor here is that being Asian was a barrier in the beginning phase of their career but when their credentials and capabilities had been established, then being Asian became an asset. As one subject put it, "I can be used to many different ways,....I am a show piece for minority administrators."

How the subjects overcame barriers: All of the subjects in this study employed such strategies as hard work, being knowledgeable, and proving their qualifications. They directed their energy and hard work toward achieving their goals, rather than dwelling on discrimination or injustice. They refused to submit themselves to debilitating negative emotions and attitudes. They persisted with an optimistic outlook. Having a positive attitude played a critical role in overcoming the barriers they faced. Being patient and tolerant were another strategy they

employed to overcome the barriers. With their optimism, positive outlook, and self-confidence, they turned negative experiences of discrimination into a positive force. For them, discrimination became a motivating factor for achievement and success. For many of them, their ethnic pride and self-respect made it important to them to show Americans how good they are, and thereby reflect positively on all Koreans. It was apparent that to many of the Korean-American women in this study, their success was intimately intertwined with the success of their family, and, furthermore, with the success of their native country. They were determined to be winners and thereby to honor their family and their native country. Pride is very important to many Koreans, and this often becomes a powerful motivating factor for many Korean-Americans. To achieve this goal, they endured many hardships with patience and tolerance, and concentrated their energy on working hard. And this is the exact strategy that these subjects employed to overcome the occupational barriers they encountered.

### Implications and Recommendations for Practice

Several practical implications and recommendations may be derived from this study for Korean-American women and women in general, present and future, who elect to enter and strive for success in the world of work. These implications and recommendations have relevance for parents, teachers, counselors, and anyone assisting them. They are:

1. This study suggests that the development and enhancement of masculine traits are important to the occupational success of females. In American society the masculine characteristic of assertiveness, competitiveness, dominance, self-confidence, self-reliance, independence, risk taking, and adventurousness are positively related to occupational success. Therefore, child rearing-practices that foster more psychologically masculine sex-typing need to be practiced by parents. Traditional sex-role stereotypes imposed upon daughters during childhood could result in the nurturance of feminine traits that would be a clear disadvantage for achieving career success in a competitive society.
2. Interpersonal skills should be taught from a very early age and continue.
3. Parental encouragement and support are important in facilitating the career achievement of daughters. Therefore, from an early age on, self-confidence and high self-esteem should be instilled through support and encouragement.
4. The high expectations of parents in terms of educational attainment and occupational achievement seem to be an important factor in their children's career success. The self-fulfilling prophecy is a very potent force. It is recommended that parents, teachers, and counselors set, whenever possible, high expectations of their daughters and their students.
5. One's educational level is one of the variables for occupational success. Parents, teachers, counselors, and anyone who is assisting children and adults should encourage them to achieve a college education, and perhaps even an advanced degree.
6. The ability to maintain a positive attitude toward oneself and toward one's work appears to be a factor for success.
7. The Korean-American women and women in general need to anticipate certain barriers she will encounter: racial and gender discrimination, cultural differences, and for those who were not born in America, language difficulties. They need to prepare strategies to overcome such barriers.

It would be interesting to repeat this research with other ethnic minority groups. Such studies would stimulate and enhance further understanding of women's career development.

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## **UNDERSTANDING CAREER CHOICES IN CONTEXT**

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### **Introduction**

Over the past several years challenges have been made to traditional theories of career choice. One of these challenges has been a call to consider the contexts in which individuals live and their influences on career choices (Hackett & Lent, 1992; Vondracek, Lerner, and Schulenberg, 1986). The following explanatory model of career choices was developed from original research (Vermeulen & Minor, 1998), as well as an integration of earlier career theory (Brown, Brooks and Associates, 1996; Savickas & Walsh, 1996).

The purpose of this model is to create a framework to explain the influences on career choices over the lifespan. No attempt is made here to specify the processes, or the strength of different influences, by which these factors interact to influence choices.

The term "career choices" as used in this model refers not only to initial occupational choice, but also to all those choices made previously and subsequently that influence occupation or job

choice.

## **Contexts**

Social, cultural, geographic, and hereditary contexts influence career choices. Social contexts are those in which groups and individuals interact directly with the person. Social contexts include families of origin and procreation, nuclear and extended (including family socioeconomic status); school and school-related activities; community (including ethnic group) interaction; and interactions in organizations.

Cultural contexts include national political priorities, cultural expectations and movements, economic cycles, changing occupational technology, changing organizational structures, workplace support of family/relationships, labor force participation of specific groups, and bias, stereotyping and oppression.

Geographic contexts have to do with the individual's physical surroundings and include availability of natural resources and levels of pollution.

Hereditary contexts are those with physical bases. They include gender, race, physical attributes, and drives.

## **Individual Characteristics**

Individual characteristics are relatively stable products of the interaction of the individual with the social, cultural, geographic, and hereditary contexts; except for developmental stage, which presumably changes over time. They include personality, intelligence, special talents and limitations, health, and developmental stage.

## **Core beliefs**

Core beliefs are those beliefs held most strongly by individuals. They exert a strong influence over individual career choices. Core beliefs include beliefs about gender roles and family roles, self-efficacy expectations, work salience, and spiritual beliefs.

## **Specific Factors**

Specific factors are those most immediately affecting career choices. They include the availability (or lack of availability) of information about self, occupations, and probable outcomes of occupational choices; expectations of self and others; perceived and actual barriers; a sense of empowerment, or lack of it; individual values; interest in the work and aspects of life related to the work; economic need; access to appropriate paid employment; conditions of



employment of a position being held or considered; and achievement motivation.

## **Propositions**

1. Career choices are shaped through the constant interaction of social, cultural, geographic, and hereditary contexts over time. This process takes place through the influence of the contexts on individual characteristics and core beliefs and of all three on specific (immediate) factors influencing decisions.
2. Core beliefs about appropriate gender and family roles, spiritual beliefs, self-efficacy expectations, and work salience have a strong impact on career decisions, both directly and through specific factors that influence those choices.
3. The individual characteristics of personality, intelligence, health, special talents and limitations; and developmental stage are developed through continuing interaction of hereditary, social, cultural, and geographic contexts. They influence career choices both directly and through impact on core beliefs and specific factors.
4. Individuals regard their careers differently and exhibit different career-related behaviors at different times in their lives.
5. Specific factors that influence an individual's career choices are a result of the constant interaction of the contexts and the individual. They are also influenced by that individual's characteristics and core beliefs.
6. An individual's life is his or her career; individuals make choices about how to construct their careers, and individuals seek to integrate all aspects of life.
7. Individuals can be assisted in making career choices by helping them understand their core beliefs, individual characteristics, the characteristics of their own contexts, their current individual circumstances and by enabling them to view themselves as having the ability to make and implement their own career choices.

## **Implications**

1. This model can be applied to individuals of various cultures. Particularly the social and cultural contexts are unique to the individual's situation. It can apply to people in different countries as well as people in the same country who belong to different cultural groups.
2. Career counselors working with adults, as well as those working with young adults seeking their first jobs, can use this model as a checklist to identify

individual experiences and beliefs that may influence their choices.

3. Schools, families, and communities, need to acknowledge and plan for their influence on the career decisions of their young people. They need to provide occupational information and related experiences, a supportive environment where students can develop a sense of self-efficacy, a wide variety of experiences that enable students to determine which they do not like, as well as which they like, and bias free environments to encourage self expression.
4. Organizations need to acknowledge their influence on and responsibility towards employees. They need to provide working environments that encourage personal growth, as well as the development of work-related skills. They need to minimize barriers, real or perceived, to development and advancement. Those perceived barriers could include differential treatment of those of a particular race, gender, ethnicity, or ability level.

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## USING VIDEO TO LINK COUNSELING THEORY AND PRACTICE

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### Introduction

The use of video can 1) stimulate class discussion; 2) demonstrate counseling skills in action; and 3) teach specific strategies and interventions. This presentation will present ways to integrate counseling videos into the counseling curriculum and suggest options for continuing education for practicing counselors. When linked to the Internet, videos can provide a valuable learning tool for distance learners, as well.

Through the use of video, students learn about counseling theory by watching theorists in action and hearing about the theory first hand. Directed study questions, resources for further study and links to web pages all help students gain further knowledge about the theory they are studying.

Students in beginning, intermediate, and advanced skills classes can observe experts using counseling skills ranging from simple paraphrasing to immediacy or confrontation and can see how the client reacts to the counselor's interventions. Or, they can watch a demonstration of role playing, scaling, or using "the exception" to help clients move forward.

### History

We have co-taught a course in counseling theory for several years. During that time, we sought out various video tapes to help us teach about theories. However, many of the tapes available were of "actor" clients and, while demonstrating specific interventions, often appeared to be false or disjointed. Others were poorly produced, with poor picture and/ or sound quality. So, we begin looking for a way to do our own.

In 1995, under a contract with Allyn & Bacon, we begin to produce the first series of 12 video, Psychotherapy with the Experts (Carlson & Kjos, 1998). We invited recognized professionals to serve as our guest "experts." And, we recruited four clients—a white female, a black female, an Hispanic male, and a white male—to serve as our clients. Depending on client availability, the experts met with two to four of the clients, producing a total of 36 counseling session tapes. For each expert, we selected the tape that we thought best portrayed the featured approach to therapy.

We then brought together an audience of graduate students and practitioners to meet the expert, view an opening interview, watch a video of the counseling session and share in a discussion of the theory. The opening interview was based on topics about the theory that included multicultural issues, application with different types of clients, adaptations in the approach for differing client needs, application for group or family counseling, and research concerning the theory. After watching the session video, the audience was invited to ask questions concerning the theory and the counseling session. This series was completed in late 1997.

In 1996, under a second contract with Allyn & Bacon, we begin a new series, Family Therapy with the Experts (Carlson & Kjos, 1998). This series features 13 family therapists and used a format similar to that of the first series. A number of families that, we believe, are representative of families in our society, participated in this series. These include intact families, couples, a white mother and son, a black mother and son, and a gay couple.

A "Study Guide" is packaged with each video. The study guide includes a brief biography of the "expert," a complete transcript of the therapy session, a list of resources for further study, and a 15 question, multiple choice test for continuing education credits.

We are currently in the process of developing a third series, Brief Therapy Inside Out (Carlson & Kjos, 1999) under a contract with Zeig & Tucker. This series, which uses a different format, will feature leading brief therapists. For this series, each therapist will work with a different client.

### Application

Both class discussion, and student learning are enriched when students are able to view video tapes of interviews with and counseling sessions conducted by experts in counseling theory. We are developing a series of discussion questions to encourage students to look for specific information and to make judgements about what they observe in the sessions and the accompanying interchange. For example, the following questions might be used to stimulate discussion of the first segment of Person-centered Therapy With Natalie Rogers:

1. From what you have learned from the text, what characteristics does Rogers mention about person-centered therapy that are similar to existentialism?
2. Rogers considers person-centered therapy to be democratic. Explain.
3. Why does Rogers feel this theory works in all cultures?
4. What does Rogers feel is the most "powerful thing" for the client in therapy?
5. In your opinion, why might it be hard to teach students to "deeply listen"?
6. Why does Rogers feel that people in addiction recovery benefit from both structure and person-centered therapy?

7. Define the three principles of person-centered therapy as explained in the video:  
Empathy:  
Congruence:  
Unconditional Positive Regard:
8. In what way is expressive art like another language?
9. What are Rogers' general goals in therapy?

A full set of discussion questions for this video and others can be accessed on the Internet at <http://www.govst.edu/users/gdkjos/coresource.htm>. Students might also be asked to view the video independently and complete the multiple choice test included in the study guide.

A second application is in teaching counseling skills and interventions. Students can view different approaches to building a relationship, using immediacy, questioning, or helping the client develop insight. The brief therapy series includes demonstrations of hypnosis, NLP, EMDR, and the use of fantasy. A sample lesson plan for teaching engagement skills using the videos suggests that the instructor show the first 10 minutes of a counseling session asking students to pay attention to attending behaviors, minimal prompts, open questions, and client focus. This and others are or will be available at the above Internet site.

#### Suggestions for Further Work

Further work in this area includes the development of on-line courses for distance learners based on a video series, and the production of videos to address other areas such as counseling interventions, working with drug and alcohol addictions, therapy with children, and career counseling.

The videos can also serve as a basis for research of the use and effectiveness of videos in teaching theory and skills. Other areas of research include content analysis of one or more therapeutic interview or in comparing the work of different therapists with the same client. For example, in the first series, the African American female client is seen by James Bugental (Existential), Lenore Walker (Feminist), and Jon Carlson (Adlerian).

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Carlson, J. & Kjos, D., (1998). *Family Therapy with the Experts*. [Videos] Needham Heights, MA: Allyn & Bacon. (*Adlerian Therapy with James Bitter, Behavioral Therapy with Richard Stuart, Bowenian Therapy with Philip Guerin, Culture-sensitive Therapy with Jon Carlson and Mary Arnold, Experiential Therpay with Gus Napier, Feminist Therapy with Cheryl Rampage, Internal Family Systems with Richard Schwartz, Narrative Therapy with Steve Madigan. Object Relations Therapy with Jill and David Scharff, Satir Therapy with Jean McLendon, Solution Oriented with Bill O'Hanlon, Strategic Therapy with James Coyne, Structural Therapy with Harry Aponte,*)

## **BENEVOLENT DICTATION TO GUIDANCE ABANDONMENT**

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### **ABSTRACT**

American "Baby Boomer" parents are organizing their elementary students' lives to automaticity. The motives for this covers the full spectrum from the most benevolent to the most self-seeking. In early grades most students find structure comfortable. With great variation in ages, the divergent thinkers rebel in some manner. Often by secondary school these parents, from the "do your own thing generation," step back respecting their children's wishes. Here, however, the students face life and career selection with poor decision making skills. There are also the parents who conversely react to rebellion by tightening the reins to the point that they, in fact, are making all decisions for their children as a means of control. This parenting also leaves the student ill prepared in decision making skills. College professors have observed far too many students taking five or more years to obtain a trial and error bachelor's degree. Seeking an answer to relieve the problem, a research project has been undertaken asking how fifteen other countries work with their students. Those countries were visited over six years. The findings are ready.

### **QUOTATIONS**

Almost one hundred fifty years ago, a Wesleyan minister wrote, "A determined purpose in life and a steady adhesion to it through all disadvantages, are indispensable conditions of success." William M. Punshon (U.S.A.)

A contemporary of Punshon, but an attorney, stated, "It is a poor disgraceful thing not to be able to reply, with some degree of certainty to the simple question, What will you be? What will you do?" John Foster (U.S.A.)

### **INTRODUCTION**

During the Depression, families followed the time honored practice of including elderly relatives in their homes. The Greene Grandfather was no exception. Due to physical problems, "Grandpa" was no longer mentally alert. While his daughter-in-law was at a church meeting, the father of the family ran into an open cupboard door with such force that he was rendered



unconscious. Returning home, Mrs. Greene found her husband on the kitchen floor. When she asked "Grandpa" why he hadn't called for help, he replied, "I had to find out who left the cupboard open."

## THE PROBLEM

Who left the cupboard door open is not the emphasis here either. About seventy percent of our youth entering higher education at the twenty first century, are on the floor with Mr. Greene. However, part of the cause may be new, but the problem is anything but new as illustrated in the one hundred fifty year old stilted quotations. In sixteen seventy-eight, John Wray said that schoolboys are most wasteful as they were happy to receive nothing for their tuition. Causes vary, and often reflect the current era.

Most students wish to do well especially in areas that they find interesting. In the field of reading there is heavy documentation of students being able to read and comprehend written material well above their tested levels because of a keen desire to know the content. Automobile and motorcycle repair and maintenance manuals are notable for the percentage of comprehension that "cannot" happen. Regular content area teachers would be thrilled to do this, is they could be told realistically how to accomplish it. How does one get a class electrified by verb tenses? Yet using verb tenses correctly is essential to genuinely advancing in most areas and industries. Maturity is the secret to working on something that is useful but not exciting. Few students wish for the "Peter Pan Syndrome," which is "I don't want to grow up." Maturity aids in helping students obtain their goals. Goals not perceived or valued hold students back far more than a physical impediments. Goals involve decision making which are both cause and results of maturity.

The story is told of the two musicians who met in New York after years of separation. The first one asked the other where he was now playing, and received the answer, "Carnegie Hall." The second then asked how he might get there, to which the first replied, "Practice man, practice!" Decision making takes the same practice as music. Few highly successful musicians wait until their late teens to begin a musical instrument. Decision making needs to be practiced long before that age as well.

The current finger points toward the parents who through the most kindly of motives, or most self-seeking reasons, literally plan the elementary, middle school, and early secondary students' lives so minutely that all that is required of these students is to show up at the proper practice, game, or meeting. It may true that these students stay out of trouble because of the opportunity to find the undesirable, yet these same children haven't the time to mature either.

Generally speaking all of these sports, organizations, and lessons are quite meritorious in themselves. To name a few: baseball, basketball, football, soccer, swimming, Boy Scouts, Girl Scouts, Campfire Girls, Candy Stripers, Boys' and Girls' Clubs, 4-H, dance, gymnastics, and numerous others. Each is excellent, and children should participate in some of these activities. Parents are involved in most of them, and that helps strengthen the family. However, milk is said

to be the perfect food, but too much milk can be deleterious if the child drinks copious quantities ignoring the other major food groups. College sports participants tell of vigorous daily practices which leaves them so exhausted that they fall asleep when they finally get to their lessons. If this true of top college athletes, it must also be true of their younger counterparts. Thus homework becomes secondary to the extra curricula.

Everyone needs "private time." If it could be packaged, patented, and marketed, the inventor would become the richest human in the world. The beauty of possessing this time is that each person could do with it exactly what he/she wishes. It may be speculated that many persons would use it as just quiet time to think. Possibly one could investigate a matter long held in abeyance. One could make a workable decision. Even the youngest elementary students need unstructured time. It is during this time that they learn to make decisions for themselves and avoid the "there's nothing to do syndrome." Making good decisions takes practice, practice, practice.

## DECISIONS

All decisions are not good, and many are just passable. The results of an unwise decision can even last a lifetime. Rose was asked why she married her clearly undesirable husband. After her very long pause she replied, "Well, he asked me." Career choices may be made for equally inane reasons. Until the last third of the twentieth century, parents often tried to influence college aged students "to take over the family business, practice, or profession." Parents at least held the veto power. However, parents usually paid all the expenses, which carried more clout. With the GI Bill of Rights after World War II, the students gained a financial independence and far more decision freedom. These were men and women who were older than undergraduates had ever been, and their career views were usually realistic.

Most parents today would be most happy to send their children off to higher education free of financial concerns. Few have the ability to do this in our ever higher cost of living world; therefore, most students work as well as attend higher education. There is every conceivable combination of parents and student paying varying percentages of the costs. The student who bears all the expenses is not an oddity. The five year seniors is almost accepted as the norm. Money is not the only contributing factor; ever increasing curricular demands account for much of the increased time required. Add to this, changing majors, sometimes several times, keep the student an undergraduate far too long. Then, there are loans to be repaid by many in the early years of the acquired career.

A good workable career decision early on would diminish many of the problems. Here three factors come into play:

- 1) The student must like the chosen field and enjoy the study of it.
- 2) The students must have proven ability in this field and/or prerequisite courses preferably in secondary school.
- 3) The college chosen must be a good fit for the student as well as a good fit for the chosen career.

In the survey of those who had changed majors to the point of delayed graduation, most said they

had chosen a field in which they did not have talent or aptitude. If a student did not do well in secondary mathematics, even when an adequate effort was put forth, engineering should not be his/her major. There is the children's story about the young boy who attended a new elementary school. He was very shocked, because even though he had not done well in arithmetic at his old school, he did not do well in arithmetic at his new school.

Many things, including careers, are not as appealing as they had seemed once the closer examination is made. Early education affords contact with darling, loving little children; however, these same cherubs may have temper tantrums and vomit on the teachers' shoes. Wonderful exciting fields may appear to the college freshman which were unknown up to that point in time. These type of things might be avoided with intelligent decision making and excellent guidance; however, within reason and made early on, changing majors can save commitment to the unfulfilling with a minimum loss of time.

The value of excellent career counseling is not debatable. This is a long range goal. The personnel must be found and educated. The here and now lies in helping people to make realistic, rewarding decisions. Too many parents of students in their teens, think they have given the children the opportunity to make decisions; in reality these boys and girls are allowed free reign on mostly "small" matters. Teachers observe students in odd clothing as an expression of individuality. Allowing strange food choices (often not healthful) leave parents feeling helpless. Battles may erupt over homework, yet these same parents may not even question the 3 a.m. "ice time," so the child can play ice hockey, or the ten year old's traveling soccer team that has 9 p.m. week day games.

Some other countries seem as impotent as we. All of us offer some control through admission criteria. A few struggling colleges do admit students who are not academically competent. Nevertheless, most students entering higher education have the ability to obtain a four year degree.

In other countries in order to prepare better students, decisions to place them in a preparatory curriculum in very early teens has been in place for a long time. Our American students interviewed felt this was unfair. The citizens are the masters here. The Netherlands has workable compromise in many respects. In the early teens, they place their students in one of two higher education tracks or a vocational track. This is after much counseling, and testing all through the elementary years. Also, they allow parents to place a student in a desired track for a year to see how the student performs. Our schools are excellent for the most part, but at this point and time we do not have the personnel to implement such a plan.

What we can do is teach good decision making skills to parents and children alike. As of today we can help them stem the tide with decision making skills for higher education freshman. It is like cramming for an examination; it is a poor practice, but it surely beats no studying at all.

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# STUDENTS' COGNITION OF THE IMPORTANCE OF THE CONTENT OF GUIDANCE CURRICULUM

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Dr. Chen is an associate professor of the Department of Education at National Kaohsiung Normal University, Taiwan, Republic of China, She is very much interested in the study of classroom guidance activities. She has expressed "A study on student's learning style preferences and factors that influence on teachers' decision during her instruction Classroom Guidance Activities course in junior high school" and "A research on the factors that influence student's cognition of the importance of the content of guidance curriculum", The former got the encouragement from National Science Council. The latter was praised publicly on the annual meeting of mental hygiene institute of Republic of China.

## Introduction

There are four areas to conduct guidance activities in school i.e.(1)Individual Counseling, (2)Small Group Counseling, (3)Big Group Guidance, (4)Classroom Guidance Activities. In Taiwan, junior high school Classroom Guidance Activities course was set into the school timetable in 1968. (Wu, 1990) Today, there were 52.5% teachers taking "The handbook of guidance activities for students" as primary reference for guiding, and 31.0% teachers used it as auxiliary reference for guiding.(Chen, 1995) "The handbook of guidance activities for students" as a textbook. There were various kinds of editions of the book published under the monitoring by The Ministry of Education. Generally, teachers in the same school in Taiwan adopt the same edition handbook or textbook after discussion among colleagues who teach the same course. Because the compilation of all editions of handbooks should follow the outline of the curriculum, they are similar in contents. The author categorized the guidance contents into 33 questions from 4 kinds of handbooks used popularly by southern Taiwan secondary school teachers. Through Factor Analysis Statistics Method, the 33 questions were classified into 7 clusters as following: (1)learning and overcome pressure, (2)career, (3)life, (4)puberty health, (5)evaluation and potential development, (6)rationality and communication, (7)social concern and adaptation.

It is a good way for a counselors to use 1 hour per week to conduct classroom guidance to help students. When a counselor leaves his(her) office to classroom, he(she) is just like a teacher, he(she) must induce students to learn. The attitude of students toward guidance curriculum will determine the effect of their learning. When students do not pay much attention to the course, they are usually be ineffective learners. If students feel the subject important during learning, they tend to participate enthusiastically and achieve more. So, student's cognition of the importance of the content of guidance curriculum is a major key to the decision of the distributions of teaching time and the revision of a handbook. Especially, guidance is aimed at helping students personal development, therefore, a student should be the main body of teaching in classroom guidance curriculum.

There have been some studies regarding Classroom Guidance Activities completed in

Taiwan(Wu, 1990; Chen, 1995; Chen, 1998; Young, 1993), Those studies provide some important data. But there has still not been much research regarding students' cognition to the importance of Classroom Guidance Activities published, up to now.

The purpose of this study was to provide data to help answer the following questions: (a)What rank would students rate the importance of Classroom Guidance Activities among 21 kinds of subjects in secondary school? (b)What is the most important question and what is the least important question in student's choice of 33 kinds of guidance contents and what is the reason? (c)Will gender and personality have interactive influence on the scores of the cognition of importance?

## **Methodology**

There were 654 students from six selected junior high schools, including 253 were grade 1, 181 were grade 2, 220 were grade 3. They completed "Students' Cognition of the Importance of the Content of Guidance Curriculum Scale". The questionnaire included two parts. In the first part, students were asked to arrange the rank order of the importance of 21 kinds of subjects which they learned. The sum of the rank-order of a subject (which students sorted all subjects according to their own opinion and then gave a rank-order for this subject) was calculated to understand the importance of Classroom Guidance Activities in contrast to other subjects.

In the second part, there were 33 questions, each of which represented one kind of content of guidance curriculum. These questions were designed according to Likert-type scaled. Students were asked to choose one item from "very important (given 5 scores)" "important (given 4 scores)" "no opinion (given 3 scores)" "slightly important (given 2 scores)" "very not important (given 1 scores)", according to their own opinions on each question. The average score of each question was calculated to understand the importance of the fact that how students considered each kind of content of guidance curriculum was. The higher the average score was, the more important students considered each question.

In the last of the second part, there were two open-ended questions. Students were asked

- (1)What is the most important among the 33 questions, and what makes it important for them?
- (2)What is the least important among the 33 questions, and what makes it unimportant for them?

In addition, the variables of students characteristic were divided into two dimensions. The first was gender ("male" and "female"). The second was personality ("high independence" "medium independence" "low independence"). The survey instrument of personality variables was called KO'S Mental Health Questionnaire(KMHQ).The total scores of the 33 questions which represented the importance of guidance curriculum were analyzed by ANOVA to understand if there were interactions between "gender" and "personality" on the influence of student's cognition of the importance of guidance curriculum.

## **Results**

### **1.The importance of Classroom Guidance Activities in contrast to other subjects**



There are 21 kinds of subjects in junior high school in Taiwan. The rank of the importance of Classroom Guidance Activities is 19<sup>th</sup>. This shows, in contrast to other subjects, that Classroom Guidance Activities is unimportant from the viewpoint of students. Table 1 shows students pay much more attention to English, Chinese, Mathematics etc. First of all is English. Students may know English is used around the world. In the global village, it is necessary to use English to communicate with foreigners. The second is Chinese. The third is Mathematics. This shows students pay much attention to basic subjects which students have to prepare in Monthly Examinations and they occupy a lot of learning time in a class schedule. As to Classroom Guidance Activities as Music Education, Esthetic Education, Boy Scout Training, Group Activities, Local Art, and other Elective Subjects etc., students pay less attentions to them. In contrast to English, Chinese and Mathematics, in teaching these subjects teachers need not give written exam, and there is only 1 or 2 hours needed per week to teach them.

Table 1: The Sum of the Rank-Order which Students Arranged the Importance of Subjects and the Sort According Importance Order.

Final Result (importance order)	Subject	The total of importance rank
1	English	2724
2	Chinese	3478
3	Mathematics	4871
4	Computer Curriculum	4910
5	Physical Education	6554
6	The Science of History	6745
7	The Science of Recognizing Taiwan	6758
8	Biology	6801
9	Geography	6956
10	Health Education	6959
11	Physics and Chemistry	6971
12	Citizens Education	7351
13	Home Economics	7540
14	Geoscience	8520
15	Music	8730
16	Esthetic Education	8804
17	Boy Scout Training	9493
18	Group Activities	9536
19	Classroom Guidance Activities	9572
20	Local Art	9942
21	Elective Subject	10631

## 2.Student's Cognition of the Importance of the Content of Guidance Curriculum Scale results

The results of student's cognition of the importance of 33 topics of the guidance curriculum scale were shown in table 2. The three-higher rank and the three-lower rank were picked out to classified the reasons why they are important or unimportant written by students.(see Appendix)

Table 2: Student's Cognition of the Importance of the Content of Guidance Curriculum Scale Results

	M	SD	Order
Learning and overcome pressure.....	4.299	.551	
3.To learn how to minimize exam anxiety.	4.171	.787	(18)
4.To study the learning strategy.	4.265	.797	(12)
19.To learn how to face frustration.	4.410	.745	(5)
30.To learn how to make use of time.	4.350	.782	(8)



Career.....	4.296	.595	
5.To know the relation between career decision and life.	4.502	.742	(3)
17.To know how to set the career goals.	4.339	.799	(9)
25.To know the basic skills and ability of a vocation.	4.047	.805	(24)
Life.....	4.291	.458	
33.To learn how to enrich the content of life.	4.391	.759	(6)
7.To learn how to build self-confidence, and to cultivate good habits.	4.451	.680	(4)
15.To learn how to arrange a comfortable environment.	4.073	.860	(22)
1.To learn the art of how to build human relationships.	4.636	.588	(1)
18.To learn how to get adapted to family life.	4.229	.885	(14)
10.To learn how to understand oneself.	4.229	.817	(14)
31.To learn the emotion-controlling and trouble-solving methods.	4.318	.777	(10)
16.To understand the difference between persons.	3.969	.895	(29)
21.To cultivate an exact and positive view-point of human life.	4.370	.787	(7)
8.To learn the knowledge of recreation and its planning.	3.931	.852	(30)
32.To learn how to escape from danger and protect oneself from being hurt.	4.604	.634	(2)
Puberty health.....	4.255	.781	
14.To learn the knowledge of physiology in puberty.	4.255	.781	(13)
Evaluation and potential development.....	4.172	.612	
26.To learn how to exploit one's own potential.	4.297	.781	(11)
27.To learn how to estimate the gain or loss of various method.	4.037	.818	(25)
23.To learn how to evaluate a man, an event, a matter objectively.	4.182	.842	(17)
Rationality and communication.....	4.095	.543	
11.To learn how to reject other's demand reasonably.	4.057	.903	(23)
12.To learn how to promote one's own ability of decision-making.	4.080	.837	(21)
3.To learn how to express one's own passion and opinion.	4.214	.781	(16)
9.To know the characteristic and task of both genders.	4.011	.881	(26)
20.To learn reasonable and logical ways of thinking.	4.116	.839	(20)
Social concern and adaptation.....	3.940	.564	
28.To understand the useful society resources.	3.806	.901	(33)
29.To learn the meaning of work and social demand.	4.011	.874	(26)
22.To realize the matters needing attention in the process of helping others or seeking for help.	4.127	.753	(19)
6.To familize with and give concern to the handicapped.	3.986	.846	(28)
24.To realize the teachers and school surroundings, to adapt oneself to school life.	3.873	.910	(31)
13.To understand one's own potential and the possibility of making contributions to society.	3.835	.928	(32)

### 3.Statistical Analysis Results

The cell means (M) and standard deviations(SD) for the total scores on the Student's Cognition of the Importance of the Content of Guidance Curriculum Scale are presented in Table 3.

Table 3: Cell Means and Standard Deviations for the Scores on the Cognition of the Importance of the Content of Guidance Curriculum Scale.

	Personality (independence)					
	High(b1)		Medium(b2)		Low(b3)	
	M	SD	M	SD	M	SD
Male(a1)	139.18 (N=128)	14.01	135.61 (N=128)	12.91	132.19 (N=85)	17.32
Female(a2)	140.23 (N=87)	11.64	140.43 (N=120)	13.67	140.60 (N=106)	11.60

The results of the Analysis of Variance shown in Table 4 indicated that the scores of the cognition of guidance curriculum importance on students' gender and students' independence personality, were found to be statistically significant with an F value of 3.64 for interaction ( $P<.05$ ).

Table 4: The Cognition of the Importance of the Content of Guidance Curriculum Scale: Analysis of Variance

Source of variation	SS	DF	MS	F
Main Effects	4281.00	3	1427.00	7.751***

Gender(A)	3497.32	1	3497.32	19.00***
Personality(B)	1210.24	2	605.12	3.29*
2-way Interactions(A*B)	1341.92	2	670.96	3.64*
Explained	5622.92	5	1124.59	6.11***
Residual	119306.55	648	184.12	

\*P<.05 \*\*\*P<.001

Since the Gender by Personality interaction was significant, then a MANOVA was conducted to test the significance within cells. Table 5 presents the summary results.

Table 5: Multivariate Analysis of Variance Summary Table

Source of variation	SS	DF	MS	F
Gender(a)				
Gender within High(b1)	11.81	1	11.81	.06
Gender within Medium(b2)	1449.78	1	1449.78	7.87**
Gender within Low(b3)	3078.47	1	3078.47	16.72***
Personality(b)				
Personality within Male(a1)	1960.62	2	980.31	5.32**
Personality within Female(a2)	57.88	2	28.94	.16
Within cells	119306.55	648	184.12	

\*\*P<.01 \*\*\*P<.001

Table 5 indicated that there was no significant difference ( $F=.06$ ,  $P>.05$ ) in gender within "the personality with high level independence", but there were significant difference ( $F=7.87$ ,  $P<.01$ ) in gender within "the personality with medium level independence" and significant difference ( $F=16.72$ ,  $P<.001$ ) in gender within "the personality with low level independence". To review from Table 3, it was found that female students recognized the importance ( $M=140.43$ ) of the content of guidance curriculum more than male students did ( $M=135.61$ ) in the group of medium level independence personality, and also in the group of low level independence personality (with female students  $M=140.60$  to male students  $M=132.19$ ).

Table 5 also indicated that personality had no significant influences on the cognition of the importance of the content of guidance curriculum for female students ( $F=.16$ ,  $P>.05$ ), but it had significant influence for male students ( $F=5.32$ ,  $P<.01$ ). Using Scheffe Method to compare, it was found that male students with high level independence personality ( $M=139.18$ ) recognized the importance of guidance curriculum more than male students with low level independence personality ( $M=132.19$ ).

## Conclusion

1. Compared with other courses in junior high school, the degree of importance of Classroom Guidance Activities was found almost ranked at the last. But when students were asked to rate the degree of importance of the 33 contents of guidance curriculum separately. The average point of the rank lies between "very important" and "important". It means that students identify the contents of guidance curriculum as importance even if Classroom Guidance Activities was only ranked at 19<sup>th</sup>. It is commendable that students' cognition of the importance of the content of guidance curriculum derives from self-experience and self-understanding, rather than get high scores, praise, rewards, or escape from punishment (Chen, 1998).
2. There were three most important contents which student rated: (1) To learn the art of how to build human relationships, (2) To learn how to escape from danger and protect oneself from harm, (3) To know the relation between career decision and life. The three least important

- contents were: (1)To understand the useful social resources, (2)To understand the possibility of making contributions to society, (3)To realize the teachers and school surroundings, to adapt oneself to school life. Analyzing the reasons that students wrote as the most important or the least important items, it was found that students usually paid more attention to their present needs, but neglected to prepare for future. Also, students thought that if knowledge or information can be easily got from our daily life, then, it is not worthy of being taught in a classroom.
- 3.It was found that student's gender and student's personality had significant interaction. female students with medium independence personality or with low independence personality both attached more importance to the contents of guidance curriculum than male students with corresponding level did. Moreover, male students with high independence personality attached more importance to the contents of guidance curriculum than male students with low independence personality did.

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## Appendix

### (1) Why did students think it is important?

#### A. To learn the art of how to build human relationship.

The major reasons why students thought that it's important for them to learn the art of how to build human relationship.

(a) Because humans live in society, they must come into contact with people anyway. If they have good human relationship, they will succeed in whatever they do. They can enjoy together. When some friends get success they can encourage each other, when their friends are sad, they can comfort them.

(b) If people have no good human relationship, they will be disregarded by others, so they will live lonely, feel boresome, and can even be dismissed by their group.

(c) The material about how to make friends with others, and how to get along with them is always ignored in current curriculums.

(d) Today, morality is weak, people always conflict and quarrel with each other, and even do violence to others. Through learning how to make good human relationship, society will be more peaceful.

(e) People can learn from one another, so they can increase their own knowledge, and expand their own living space.

#### B. To learn how to escape from danger and protect oneself from harm.

The major reasons why students think that it's important for them to learn how to escape from danger are as follows:

(a) Today, there are so many kidnapping and rape cases happening in our society.

(b) Life-safety is the most important after all.

(c) Everybody is worried about his own safety.

(d) People should learn to protect his own safety, lest they should be in an disadvantageous position.

#### C. To know the relationship between career decision and life.

(a) To choose entering a higher school or getting a job is an important goal for junior high school students.

(b) Most junior high school students do not understand their aptitudes. They are always disturbed by career problems, so they can get profits from accepting guidance in such problems.

(c) Everybody should make plans and be prepared for the life in the future.

(d) Career problems do exert a lot of influences on junior high school students.

(2) Why did students think it is less important?

A. To understand the useful resources in our society.

(a) There were a lot of subjects such as English, Mathematics etc., for students to learn. So, there was no time to allow students to recognize the useful resources in our society. They do not need such knowledge badly least until they are 20 years old.

(b) We do not think it is meaningful to learn these contents.

(c) People can know the information from magazines and networks.

(d) The only task of students is reading, so they need not be involved in other domains.

(e) If we have any social problems, we can turn to some relative experts who are familiar with such cases for help.

(f) Senior high school students need such socially-related knowledge much more than junior high school students.

B. To understand the possibility of making contribution to society.

(a) I am still a student. It is impossible for me to make any contribution to society.

(b) I have no ability to make any contribution to society, since I have not grown up.

C. To realize the teachers and school surroundings, and to adapt oneself to school life.

(a) Students will be familiar with school environments and teachers after a long period of time.

(b) Some schools are very large, so it is difficult for students to be familiar with all teachers and places.

(c) Students can understand school environments and teachers from brothers, sisters or neighbors. So, it is not necessary to learn them from curriculums.

(d) Students can be familiar with school environments and teachers after entering school, so teaching these is unnecessary.

(e) To make the acquaintance with many teachers would bring them no profits. They thought it is of no use to do so.

## **Boundaries: The "framework" for psychotherapy**

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### **Introduction**

Boundaries in psychotherapy can be thought of as the framework upon which a therapeutic environment is created and maintained. Before the therapist ever meets a client for the first time, a structure needs to be designed to support client growth.

Included in this preliminary structure are the determination of fees, time frames, general office practices, and an appropriate disclosure statement. In addition, once therapy has begun, the clinician must manage the therapeutic milieu in order to support the integrity of this frame. Examples of this might be the management of the therapist's personal needs for power, affiliation or recognition as well as clients' request for changing the structure. In order to do this, it is imperative that the clinician is clear about what the parameters are concerning the therapeutic structure. Many factors influence the establishment of these parameters, including theoretical orientation, ethical principles, as well as personal and professional preferences. However, the framework needs to be established prior to seeing any client, so that it can serve as a guide for therapist's behavior. Even if the therapist decides, using clinical judgment, to deviate from this established framework, it can be recognized as such and can be subject to scrutiny as to its appropriateness. As Sheldon Kopp (1977) summarizes in his book, *Back to One*, "Clarity about what you do, about how you run the therapy is absolutely necessary. It is sometimes useful, creative, and fun to vary from the basic parameters of your work. But first you must know the personal baseline from which you are varying. Otherwise how can you know when to return home, and how to find your way back?" (p. 15).

### **Rationale**

When clients enter therapy, they bring with them feelings of vulnerability. In addition, the client/therapist relationship has within it, as an inherent factor, an imbalance of power. Farber, Lippert, and Nevas (1995) address this issue: "Patients come to therapy in order to be helped by someone who presumably sees the world more clearly (i.e., with less distortion) and who may offer previously unthought of behavior or emotional options (p. 206). It is the therapist's responsibility to create an atmosphere of safety and predictability in which the clients might feel secure enough to begin their work. It should not fall upon the clients to bear the burden of setting or maintaining these parameters. If these parameters are not maintained by the therapist,



additional responsibilities are placed on the clients, impairing their ability to progress. At this point, the therapeutic milieu has been compromised.

Yet this is not always as simple as it may sound. Beginning therapists, in their desire to please their client and be "helpful", may allow numerous deviations from the framework that they have established, or may not know the importance of having that framework to begin with. So they may adjust fees, see clients at odd hours, encourage phone contacts even to their homes, and allow sessions to run over their agreed upon time. At times, experienced clinicians feel that they know enough, that they do not need a structure to guide them. Often with little or no consultation, they rely on their (often grandiose) clinical judgment and go beyond the structures of the therapeutic framework, or decide that they don't need any, since they have enough experience to know when compromising situations occur. They can feel omnipotent, or just caught up in the situation by surprise. They may feel that they don't have to be bound by the "rules", not understanding the benefit for therapy in having this structure. In this scenario, the client is the one who suffers the most.

### The ideal therapeutic framework

Ideally, the therapist is responsible for management of both a) the elements of therapy as well as b) the interpersonal interactions. These two parts of the therapeutic framework can be likened to the establishment of the structure of a building, and the maintenance through the years of use. The elements, similar to the establishment of the structure, include: fees, the disclosure statement, time management, office environment, beginnings and endings of therapy, extra-session contacts including phone calls, emergencies, confidentiality, referrals (for medical, legal, or other issues). These in turn are influenced by the therapists' theoretical orientation, personal and professional boundary preferences, as well as relevant ethical principles. For example, a psychoanalytic orientation might suggest constancy regarding the times of appointments. The therapist might have a personal preference to have a stable schedule, one which deviates little, if at all. Ethically, it would be important to communicate clearly how appointments are scheduled to the client, regardless of the method.

The interpersonal interactions also need to be managed by the therapists. In order to do this, they must be aware of their own personal values, prejudices, deficits, and needs. These interpersonal interactions can support or deter the process of therapy. Supportive interactions include selecting a theory and therapeutic intervention appropriate for the needs of the client, providing clear expectations, and respecting the client's abilities and preferences. Mismanagement might include the therapists responding to their own needs for power or affiliation, which could impact their clinical judgment. A powerful example of this would be the issue of touching or hugging the client. Some therapists have determined, based on their theoretical framework and personal comfort with physical contact, that occasional touching, to emphasize a point or provide a modicum of support, is acceptable. Another therapist, having just finalized a divorce and feeling isolated, might be drawn to touching a client for the personal satisfaction or need for gratification.



## Interferences and causes

There are many ways in which the boundaries in the therapeutic relationship can be disrupted. For example, if the therapist does not adhere to the guidelines of his/her professional code of ethics, the course of therapy will suffer. This failing can be traced to lack of knowledge of the codes, naiveté, inexperience or a sense of omnipotence. Further, countertransference issues can emerge as therapy progresses, resulting in non-professional behavior on the part of the therapist and a sense of confusion on the part of the client. Sexual feelings are but one aspect of the countertransference process. Overprotective feelings, need for affiliation, or negative attitudes also serve to erode the therapeutic frame. Another area to be considered is the therapist's self disclosure. This technique can be very powerful in certain contexts with clients who can manage this information. However, therapists can be unaware of the potential danger of allowing too much self disclosure. In fact, it has been reported in the literature that excessive self disclosure is the most frequent boundary violation precursor to therapist-patient sex (Simon, 1991). He also reports that these precursors of therapist-patient sex can be as psychologically damaging as the actual sexual involvement itself. In the broadest sense, issues of problematic drug and alcohol use, poor health, emotional instability, family problems or financial pressures of the therapist can negatively impact their professional judgment and functioning.

The consequence for the client is often feeling burdened, confused and/or distraught by erratic behavior on the part of the therapist, shifting expectations, or unprofessional demands. Critical therapeutic ingredients of safety and security could be compromised to the point the effective therapeutic work stops. Particular preferences or prejudices can influence the way the therapist responds to the client, including altering professional standards of practice or the maintenance of therapeutic boundaries. A therapist, for example, could find that he is particularly solicitous with pregnant women, letting sessions go overtime or letting the therapy bill go unpaid. Another therapist might have some unresolved feelings regarding her alcoholic father, and become punitive with men presenting with substance abuse issues.

Client characteristics become a major management issue for the practicing therapist. Having determined their theoretical orientation, their personal preferences, any values or biases that may be relevant, the therapist then takes into account the elements necessary to address for a particular client. The client's ego strength, the presenting issues, their diagnosis and available resources, all need to be factored into the determination of the variable part of the therapeutic frame. For example, the demands made on the therapist by a borderline client are significantly different than those of a client dealing with uncomplicated grief. Depending on the client, the clinician might alter the way s/he typically handles phone calls, emergencies, therapeutic interventions, and appointments.

## Process for establishing appropriate boundaries

Several factors need to be addressed in the establishment of a professional framework for

therapy. A process is needed to establish and maintain an effective therapeutic milieu. This process can be thought of in two separate, distinct components.

1. The first component occurs as a therapist is developing a professional identity and continues as refinement takes place through the years of practice. To begin that process, elements that need to be addressed are:

a. Identification and continued awareness of the therapist's own personal needs, values, and biases. It can be said, "Therapist, know thyself."

b. Identification of one's theoretical orientation, and how this impacts one's therapeutic framework.

c. Identification of and adherence to a professional code of ethics.

2. The second component relates more to the factors that need to be considered when working with any given client.

a. At this point, it is critical to assess the client's ego strength, their underlying dynamics, their presenting issues, and the diagnosis of the client. These factors will aid in the determination of how the therapeutic frame will be upheld for this particular client. Clinicians then make determinations, based on their expertise, on where variability is clinically sound.

b. Exceptions need to be noted; whenever clinicians find themselves making "exceptions", exempting one certain client from the framework that has been established, it is wise to view this with a critical eye, seek consultation, or confer with peers.

c. Ongoing professional examination of a clinician's professional skills and knowledge, as well as an awareness of current issues in the therapist's life that may impact clinical judgment. This self examination is an ongoing process that is facilitated by membership in an ongoing consultation group and/or personal therapy. Becoming a part of a professional organization also supports ethical practice.

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# **The adjustment of young employees to their love lives and work lives**

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## **1. Introduction**

As early as the thirties, Freud (1952 ) had proclaimed that a mature personality is one capable of love and loving and constructive work and creativity. Gedo (1997) in his neo-psychoanalytic position, also advocated the similar: the major component of mental health are love and work. In concern with these, the YWCA of Hong Kong , with the present researcher, tried to study these two aspects of lives of Hong Kong young people. In Hong Kong, young people are defined by an upper limit of forty-one years old. People over this age are not entitled for Excellent Youth Award.

## **2. Methodology**

To start with, the present researcher tried to explore the scope of the study. To avoid, as far as possible, super imposing preconceived constructs onto the research, the researcher decided to use the method of Focus Group. From the findings of the Focus Group, a questionnaire for a mass survey will then be generated.

### **2.1 Focus Group**

Starting from November, 1997, five Focus Groups of size 18 had been conducted. The time gap between each Focus Group was conducted was a fortnight. In each Focus Group, there was one recorder, one observer and one interviewer. The rest of the fifteen members were invited because of their occupation. Taken together, the members of the five Focus Groups summed up to a proportional sampling frame of the Hong Kong economically active people, by age and occupation. (Census and Statistics Department, Hong Kong, 1998, pp. FB15).

The present researcher had considered the dilemma of heterogeneous groups vs homogenous groups. The considerations centered around the occupations of participants. In heterogeneous groups, there are chances that members are exposed to ideas, attitudes and values not typical of themselves and are thus more stimulating. The result will be that the interview will generate more findings from more perspectives. On the other hand, participants may become more reluctant to talk with people from different backgrounds.

The researcher decided not to anticipate about what would happen, but test the possibilities empirically. Thus the first Focus Group was heterogeneous. It was found that participants from lower social classes dressed casual and talked less. Participants from upper classes dressed smart or formal and were more dominating. The researcher amended it by making the second Focus Group homogenous. The atmosphere then became full of life. From the third Focus Group onwards, all groups were homogenous.

The flow and the questions of the Focus Groups were semi-structured and non-directive. The questions discussed were:

About their work lives -

What are the factors that concern you with the satisfaction of your work life? Why?

How would you enhance these factors?

Have you ever tried it out?

How effective do you think they are?

About their love lives

What are the factors that concern you with the satisfaction of your love life? Why?

How would you enhance these factors?

Have you ever tried it out?

How effective do you think they are?

## 2.2 Mass survey

From the findings of the Focus Group, a questionnaire was designed. It was then administered to a proportional sampling frame, by age and occupation, of the Hong Kong economically active population. Since the questionnaire must contain an in-built mechanism to validate itself, the present researcher decided to use the Subjective Mental Health Scales (Chiu, 1994) as measures for concurrent validity. Subjective Mental Health Scales (SMHS) was derived from a mass research about the indigenous mental health of Hong Kong people. It contained two scales: SMHS1 and SMHS2.

SMHS1 measures the extent people think they are socially desirable. To be socially desirable, in Chinese culture, one must be smart in social situations, work situations and the like. One must be sociable, liked, friendly, co-operative, responsible, honorable and adaptive.

SMHS2 measures perceived self-sufficiency. The Chinese culture encourage people to be self-sufficient in many aspects of their lives, such as school lives, work lives, social lives, family lives. To be self-sufficient, one must be capable enough to lead a decent life. It is tied with the perceptions of abilities and achievement. For most of the time, achievements are norm referenced.

The rest of the questionnaire, Part 2 to Part 8 measures about what subjects regarded as important in their love lives and work lives and the ways they cope with it in case something

happened. In Part 8, there were two saline items which asked subjects directly how satisfied they were with their lives. e.g. How satisfied are you with your love life? And How satisfied are you with your work life? Part 9 measures demographic data.

### 3. Analysis and findings

#### 3.1 Criteria validity

To establish concurrent validity, the Subjective Mental Health Scales were correlated with the two items on satisfaction with work lives and love lives. It was found that all correlations were strong and significant. The two items were thus validated. The two validate items then took important roles in subsequent analysis.

The item on work satisfaction was then correlated with parts of the questionnaire that measure work lives. The item on satisfaction with love lives was then correlated with parts of the questionnaire that measure love lives. A lot of significant findings were found. It was found that people who were more mentally healthy tended to approach both the people and the task in their work lives in active and constructive manner. They use similar approaches in their love lives are well: being active and constructive.

#### 3.2 Work lives

What subjects regarded as important in their work lives that correlated with satisfaction with their work lives were the motivating factors in the world of work. What they worried in case would happen were about the maintenance factors in the world of work. Maintenance factors are important to maintain live, such as making ends meet. Motivating factors are important to make employees feel at home with they work and enjoy working. (Herzberg, 1987).

When they came upon difficult tasks, mentally healthy subjects tended to adopt problem solving approach by means of gathering information and analyzing both themselves and the task. They would upgrade their knowledge and skills whenever necessary. They would learn from informed colleagues or take extension courses. When they come across difficulties in dealing with people, they would reflect on themselves, view the problem from different perspectives, adopt problem solving approach or try to be accommodating. When they had difficulties with the policies in their organizations, they would analyze the situation, adopt problem solving strategies and prepare themselves for the worse. They also found these ways effective.

3.3 The data set was collected over seven months from January 1998 to July 1998. During that period, Hong Kong experienced an economic recession. Many companies used cuts and layoffs to reduce lose. Unemployment rates had gone up. It aroused an atmosphere that people worried about the shrink of the maintenance factors of their work lives. The researcher tried to find out if it had any effect on Subjective Mental Health Scales. By using T-test to compare the performance of subjects on SMHS in 1994 with those on 1998. It was discovered that SMHS1 had gone down significantly. Since the common factor to have influenced the population was the recession. It was concluded that the recession had caused mental health as measured by



subjects' perception of their Social Desirability (SMHS1). The influences were marked poorer performance of the

following items:

- feel satisfied, delighted and happy most of the time.
- understands and accepts tides in life are natural
- honest
- co-operative
- force myself to relate to someone who I dislike and pretend to be friendly
- like my family life
- live orderly and have sufficient time for rest
- can understand the situation I am in
- feel easy with both the societal norms and my impulses
- a good listener to others' expression
- friendly
- accept responsibilities for my own actions

### 3.4 Love lives

What subjects regard as important in their love lives that correlated with satisfaction with their love lives were whether their partners took the relationship serious. When their relationship deteriorated or a third party appeared, they would reflect on themselves, consider the maturity of the relationship, enhance more effective communication with the partner, became more caring and understanding, and finally would respect the wish of the partner. Subjects also found these strategies effective.

3.5 When the satisfaction of love lives scores were compared between both genders, it was found that female subjects tended to be more satisfied with their love lives than males. It was discovered that females scored higher on all of the following items - all, except the first item, were relationship enhancing:

- expect their partners to be more ambitious.
- communicate more with their partners.
- more reflective.
- consider about the maturity of the relationship in case.
- more caring and understanding.
- more committed.
- respect their partners more

### 3.6 Demographic analysis

When subjects demographic variables were compared, it was found that subjects with higher education, higher occupational status, and higher monthly salary had better Satisfaction with Work Lives and Satisfaction with Love Lives. Subjects with the lowest education, occupational



status and income were both low in their Satisfaction with Work Lives and Satisfaction with Love Lives. Females scored marginally higher on Satisfaction with Love Lives than males.

The findings that levels of education, occupational status and income are positively correlated with satisfaction with work lives are not surprising. In Chiu (1994), it was found that people with better mental health feel satisfied, delighted and happy most of the time. They always have higher levels of education, occupational status and income.

#### 4. Discussion

##### 4.1 Work Lives

**As indicated by the above findings, subjects who adopt more active and constructive ways of adjusting themselves to their work lives were more mentally healthy and satisfied. The strategies involved communication, learning, problem solving and**

**accommodating to challenges. These had indicated that subjects had the good wills to do better. The corollary is that if people who adjust themselves to the world of work with**

lesser of these means, their adjustment will likely be less mentally healthy and less satisfied. In Hong Kong, there were only a few industrial social workers and industrial psychologists practicing. The implication is that active and constructive ways of adjusting to the world of work should be further encouraged via company seminars, staff training and development programs.

Employers should know that cuts and layoffs should be their last resort to deal with financing difficulties. The impact upon both employers and employees are tremendous. This saying is not to plea mercy. Employees can always tell whether the management have vision and are capable. They can tell whether the management are doing their jobs well with integrity. People will do their jobs in different manner depending on whether they are managed by coercive power or whether they are managed with honor. The stress generated by the former style of management will result in more faults, antagonism, negativism, absenteeism and passive aggression (Muchinsky, 1993). It will lower employees' problem solving abilities and creativity. It will also do harm to organizational commitment. On the contrary, if employees are managed with honor, employees like their job and the company more. They will devote themselves more when their employers have hard times (Lee, 1997).

##### 4.2 Love Lives

According to Corey and Corey's (1993) Five Major Components of Love, authentic love consists of care, responsibility, respect, knowledge and commitment. Intimacy is represented by understanding, caring and respect. Sherman (1993) point out that quality intimate relationships are characterized by understanding, trust, sharing and equality. Ptacek and Dodge (1995) stated that when relationship deteriorates, if partners have the perception that they are making an effort to cope, their satisfaction will increase. The present research showed female subjects

scored higher than males

on items measuring quality relationship. It thus reflected a phenomenon that male subjects were less aware of such importance and they were less satisfied with their love lives (Basco,

Prager, Pita and Tamir, 1992). Basow (1992) pointed out that males are often less expressive of their feelings and feelings towards their love ones. They thus receive less affectionate feedback, are less understood and feel more frustrated. The present findings seemed to have also discovered the similar.

These findings point to the possibility that males are less capable in maintaining intimate relationships and coping with issues arising. The suggestion here make is to facilitate males to be more responsive to intimate relationships, have the heart to maintain it well. This, opens up a field of developmental work for man: to learn to be a good lover.

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## **Do Human Beings Know What They Value?**

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Values serve as standards for goal setting and motivations for actions. Hence, value clarification has been viewed as central to career decision-making and planning. Brown has actually developed a career theory with value ladder at the core (Brown, 1996).

Various value laddering methods have been proposed and applied. "True reasoning" and rationality have been recommended as the best strategies for value clarification (Savickas, 1995). The substantial studies by Cochran (1983) and Sharf (1984), however, raised doubts about this traditional approach. Both studies pointed out the discrepancy between values derived from different methods. Such findings seriously threatened the instrumentality of all kinds of value clarification and brought out the fundamental issue: can human being truly know what they value?

This crucial issue obviously didn't secure much empirical attention as it desired. However, the contradictory findings of studies on Gottfredson's (1981) priority proposition inevitably pointed to the need of further research along this line (Liu, 1993).

According to Gottfredson (1981), the criteria used by adults in occupational choice are priority-specific. However, empirical evidence for her argument was conflicting. A close inspection revealed the pattern of the relative importance of Gottfredson's criteria was subject to the type of measurement. Three stimuli types have been utilized in related research: actual occupational titles, hypothesized occupations, and direct ratings. Studies using actual occupations tended to support or partially support Gottfredson's assertion; whereas studies using hypothesized occupations or direct ratings tended to support the opposite priority order (Liu, 1993).

The purpose of this study was to investigate the moderating effect of measurement type on value ladders elicited. In particular, this study attempted to verify the relation between stimuli type and the priority order observed in previous studies concerning Gottfredson's proposition.

### **Method**

The research design was a four-set completely randomized 3x3x3x3 repeated measures factorial. The four sets were combinations of two two-level moderating variables, stimuli types (ST) and conditions (CD). Each set contained 27 treatment combinations, which were completely crossed combinations of three three-level independent variables, including compatibility with interest (COI), prestige level (PL), and gender-appropriateness (GA). The fourth independent variable (compatibility with ability, COA) was not completely crossed with others due to its confounded relationship with COI.

### **Subjects**

The targeted population was college students. Subjects were undergraduates recruited from a psychology course. Of the 62 subjects providing complete and valid data, there were 23 males and 39 females, averaging 19.69 years old with a standard deviation of 2.03. Twenty-nine of them were freshmen, 19 sophomores, 11 juniors, and 5 seniors.

According to Holland's typology, 8 of them were Realistic, 13 Investigative, 4 Artistic, 27 Social, 7 Enterprising, and 3 Conventional.

### **Variable Definitions and Measures**

**ST and CD.** The occupational rating (OR) was the dependent variable, indexed by a subject's reaction to the presented occupation on a 100-point Likert-type scale. Occupations were presented in two levels of ST. An actual occupation was presented as an occupational title in the real world, while a hypothesized occupation was described as a combination of specific occupational type, prestige level, and sex-type. Each occupation was rated in two levels of CD. One represented intention, the will or willingness for an individual to consider entering an occupation. The other represented attractiveness, the extent to which an individual liked an occupation regardless of his/her intention to attain it.

**COI and COA.** The interest and ability types were determined by the Self-Directed Search (SDS, Holland, 1985), and occupations were classified according to the Dictionary of Holland Occupational Codes (DHOC, Gottfredson & Holland, 1989). The levels of COI were defined as follows.

- 3: the occupational type = the highest interest type,
- 2: the occupational type = the third highest interest type, and
- 1: the occupational type = the fifth highest interest type.

COA was defined in a similar way. COI and COA could not be manipulated by occupation assignment simultaneously since the ability and interest types of each subject were fixed. Therefore, the COA was determined in a post hoc manner.

**PL.** Prestige level of an occupation was obtained from the Duncan Socioeconomic Index (SEI, Stevens & Cho, 1985). The levels of PL were defined as follows.

- 3: SEI > tolerable-effort boundary (maximum expected level),
- 2: SEI = expected prestige level, and
- 1: SEI < tolerable-level boundary (minimum expected level).

**GA.** Sex-type of an occupation was based on the Male Dominance Index (MDI, U.S. Department of Labor, 1986). Three levels of GA were defined as follows.

- 3: same-sex workers > the maximum expected number,
- 2: same-sex workers = the desired numbers, and
- 1: same-sex workers < the minimum expected number.

### **Procedure and Treatment**

The experiment took place in a group format, with 10 to 15 subjects, for about 90 minutes. Subjects first took the SDS. After they finished scoring, the six personality and occupation types were introduced, followed by the concept of occupational prestige and worker sex ratio. The last task to complete was a computer program, CHOICE, which was an author-designed C interactive simulated occupational ratings program. It consisted of the following major parts.

**Defining Social Space.** Subjects first put in their interest and ability scores obtained from the SDS. They then specified their expectations in terms of occupational prestige and worker sex ratio.

**Rating Hypothesized Occupations.** According to the social space defined, 29 occupations were presented with two of them repeated.

**Rating Actual Occupations.** There were 29 actual occupations presented, with two of them repeated. Based on a subject's definition of social space, occupations were selected from the Occupations List developed by the author. There were 341 occupations adapted from the

Occupation List by Leung and Harmon (1990) and the DHOC (Gottfredson & Holland, 1982).

### **Data Analyses**

Policy-capturing methodology (Kluth & Muchinsky, 1984) and a repeated measures ANOVA were applied. Based on policy-capturing, a simultaneous entry multiple regression was conducted for each of the four combinations of CD and ST, respectively. The COI, COA, PL, and GA served as predictors of OR. The obtained standardized regression coefficients were then subjected to a three-factor repeated measures ANOVA, with CD, ST, and criterion (CR, with COI, COA, PL, and GA as four levels) as three within-subject independent variables and importance as the dependent variable indexed by the coefficients. The Greenhouse-Geisser Epsilon was used to adjust the degree of freedom of the F test due to the corresponding significant Mauchly's W values.

### **Results and Discussion**

The obtained F values for CRxST yielded 8.19 (df=2.06, 78.33,  $p=.04$ ), indicating that ST has a moderating effect on the importance associated with the levels of CR. Simple effect analyses of the effect of CR at each level of ST revealed a  $F = 1.19$  (df=2.73, 103.79,  $p=.20$ ) for actual occupations and a  $F = 11.48$  (df=1.96, 74.56,  $p=.00$ ) for hypothesized occupations. It suggested that the relative importance associated with the levels of CR was different on ratings of hypothesized occupations but not actual occupations. For hypothesized occupations, the means of COI, COA, PL, and GA were .45, .40, .41, and .17, respectively. For actual occupations, those were .29, .26, .28, and .21, respectively. It was noteworthy that the coefficients for hypothesized occupations were consistently higher than corresponding ones for actual occupations. That is, the four criteria better predicted hypothesized occupations.

The findings pointed to the fundamental issue about the measurement of human values. Both measurement approaches are not without problems. The use of hypothesized occupations is based on the assumption that people can clearly identify and weight the criteria they use. This assumption, however, is doubtful since individuals' expressed values have been found to be different from their values in actions (Cochran, 1983; Sharf, 1984). As to the use of actual occupations, possible problems are related to the influence of uncontrolled aspects and incorrectness of raters' occupational images. The confounded relationships among sex-type, prestige level, and field of work (Hesketh, Elmslie, & Kaldor, 1990) also seriously threaten the instrumentality of this approach. Obviously, it is hard to arrive at any conclusion concerning which method may better catch an individual's true value system.

Then, what did it mean that the higher predictive ability of the four criteria for hypothesized occupations? Gottfredson (1981) has argued that: "People may have trouble verbalizing the reasons for why they rate some occupations better or more similar than others, and they often differ considerably from each other in the reasons they do give. However, they have no trouble rating occupations" (1981, p. 557). It was also noticed that the reliability of hypothesized occupations were lower than that of actual occupations. On one hand, maybe people's responses to actual occupations are more spontaneous and valid. They just overweight what they think they value when responding to hypothesized occupations. On the other hand, maybe people's responses to actual occupations are less organized and systematic. Their value systems actually function better for hypothesized occupations. Again, it is hard to know when people are showing their true values.

### **Conclusion**

The relative importance associated with criteria in occupational ratings was found to vary as a function of the presented stimuli type. Such a moderating effect confirmed the relation between measurement approaches and value ladders elicited. It did resolve the conflicting findings concerning Gottfredson's priority proposition to certain extent. Nevertheless, another fundamental issue concerning the possibility to truly identify human values was pointed to. Because a "better" measure of the "true" value system is not available yet, a multimethod approach is recommended. Clients may benefit from comparing and integrating their value ladders derived from various methods. In addition, the lack of evidence concerning the instrumentality of any value clarification method certainly leads to uncertainty. Clients should be encouraged to acknowledge uncertainty as a part of the nature in decision-making process, which may reduce irrational expectations as well as anxiety. When clarity is not available, the best strategy is to live with it.

As to the direction of future research, attempts should be made to explore the value issue. It may be impossible to find out which approach is more valid. However, efforts can be placed on finding how people feel about, react to, and evaluate different approaches under different circumstances. A qualitative approach may serve this purpose better.



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## A.A AND COUNSELING: CONFLICT OR OPPORTUNITY?

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The greatest focus in alcoholism treatment research today is matching client to treatment. As if to define the decade of the '90s in terms of research emphasis, Project MATCH, the "largest, statistically most powerful, psychotherapy trial ever conducted" (Project MATCH Research Group [PMGR], 1996), was conceived and launched in 1989-90 (Azar, 1995). The mandate of this project was to identify "which kinds of individuals, with what kinds of alcohol problems, are likely to respond to what kinds of treatments by achieving which kinds of goals when delivered by which kinds of practitioners" (Institute of Medicine, 1990).

Consistent with this research direction, the present study surveys members of Alcoholics Anonymous (AA) regarding their assessment of AA as a treatment, a grassroots approach rarely found in the literature. To measure program compliance, it also records the self-reported behaviors of AA members and compares these actions with program recommendations. This research also investigates the attitudes of AA members about other treatments, about AA itself, and seeks to identify areas of difficulty experienced when AA members address each of the 12 steps of the program.

There is no single paradigm for alcoholism treatment (Morgenstern & Leeds, 1993). Treatment methodologies are generally based on the assumptions of one of four models of alcoholism: moral-volitional, personality, dispositional disease and the AA model, according to Miller and Kurtz (1994), who say that the AA model combines social, behavioral and cognitive components. AA has been described as "far and away the most frequently consulted source of help for drinking problems" (Miller & McCrady, 1993). According to Morgenstern and McCrady (1993), AA's therapeutic message "impacts the overwhelming majority" of alcoholics in the U.S. (p. 153).

Despite these comments about AA's influence, the United States National Academy of Science, Institute of Medicine, concluded in 1989 that "Alcoholics Anonymous, one of the most widely used approaches to recovery in the United States, remains one the least vigorously evaluated" (p. 197). It might also have been said that there is a paucity of data about the AA treatment as experienced by AA members themselves.

### What is alcoholism?

Alcoholism has been described by Morse and Flavin (1992) as a chronic primary disease, often progressive and fatal, marked by continuous or periodic impaired control over alcohol consumption; preoccupation with alcohol; the use of alcohol in spite of adverse consequence; and distortions in thinking which includes denial of the condition. In 1957, the American Medical Association designated alcoholism as a disease.

### What is A.A?

AA as such is not a treatment, but rather a social movement (Makela, 1993). However, AA does provide its members with rationales such as the one which is suggestive of a medical model, wherein alcoholism is held to be a progressive illness that is "a manifestation of an allergy; that the phenomenon of craving is limited to (alcoholics) and never occurs in the average temperate drinkers" (Alcoholics Anonymous, 1976). For this reason, AA considers abstinence as the only desirable treatment outcome (Vaillant & Hiller-Sturmhofel, 1996).

The AA system employs a sponsor, or mentor, in their methodology. Kassel and Wagner (1993) describe the sponsor as an "important element of the AA approach ... an 'expert' senior member to whom initiates can turn for advice during the course of recovery" (p. 223). They also cite the Sponsor as one who facilitates the process of socialization (of the newcomer) to the group (p. 224). Le, Ingvarson and Page (1995) describe sponsorship as a source of continuous, personal help from those members who have made some progress in the program. Fagan (1986) demonstrates that, especially in the early stages of the process, sponsorship can contribute significantly toward recovery. On the other hand, Ogborne and Glaser (1985), point out that the profile of successful sponsors in AA are over 40, with a tendency to guilt, external locus of control, low conceptual level, a religious orientation, and suffering from existential anxiety, "hardly the characteristics of someone equipped to form a therapeutic bond" (p. 50).

The primary criticism of the AA program is from an empirical research standpoint. For example, Galaif and Sussman (1995) point out that correlational studies do not provide evidence to support a causal link between AA participation and sobriety (p. 164). Litrell (1991) says that only five to 13% of members will maintain an enduring relationship with AA. Furthermore, in studies where alcoholics are randomly assigned to different treatment, there is no evidence that AA works better. Vaillant & Hiller-Sturmhofel (1996) found that "about 2% of all alcoholics return to stable abstinence each year, with or without receiving treatment" (p. 157).

Le, Ingvarson and Page (1995) criticize the AA steps as revolving around themes of powerlessness, dependency, and humility. They adapt the steps to conform to counseling standards, and to change the orientation from those of removing character defects and personal shortcomings, as the AA program suggests, to developing strengths and abilities, as good counseling practice would prefer (p. 607).

Wheeler and Turner (1997) studied counselor's attitudes and experiences in working with alcoholics, as well as counselor's understanding of AA as a treatment. It was found that generic counselors tended not to feel competent working with patients with alcohol problems. As experience with client groups increased so did feelings of competence. This pattern continued, although to a lesser extent, with additional specialist training (p. 321). In their study knowledge of Alcoholics Anonymous was measured by asking the subjects (n = 91) what they knew about AA. 71% of counselors thought that AA attendance could be successfully combined with therapy. Wheeler and Turner conclude that counselors would benefit from a greater depth of understanding about the AA program (p. 324) and recommend more course content in alcohol counseling in professional training courses (p. 325).

Montgomery, Miller and Tonigan found that AA attendees were not different from nonattendees when compared by pretreatment characteristics (1994). On the other hand, the higher the degree of involvement with AA the better were predicted outcomes (p. 241). Montgomery et al. noted that their research was conducted in a residential treatment program "for which AA was a strong guiding philosophy", as opposed to AA itself (p. 244). Montgomery et al. concluded that those who study AA based on outcomes should not limit themselves to only measuring attendance at meetings, but also the extent to which individuals are applying the 12 steps of AA (p. 245).

Brown (1995) points out that the AA program has two independent parts, neither of which has therapeutic power without the other. The first of these two parts is the introduction to the program, including the literature, meetings and AA fellowship, which has as its purpose the achievement of *sobriety*. The second part involves working the steps and has as its purpose the achievement of *recovery* (p. 69). According to Brown, sponsorship is the bridge between sobriety and recovery, and therefore has the power of success or failure, and “the sponsor represents the closest counterpart to the therapist” (p. 70). For Brown, distinguishing between sobriety and recovery in the use of the AA program is important, as is the selection of a sponsor (p. 79).

Other groups which use AA as their model have proliferated since the first one, Al-Anon, was started to address problems unique to the family of AA members in 1951 (Room & Greenfield, 1993). According to a 1990 interview survey (N = 2,058), 13.3% of the adult population of the U.S. have attended some form of 12-step meeting, whether alcohol-related or not (p. 555). Room and Greenfield make a long list of groups, with diverse purposes, which model their meeting format to some extent or other on the basis of AA. Despite this proliferation, AA still accounts for the majority of 12-step attendance (p. 561). Johnson and Chappel (1994) claim that more than 150 parallel groups have sprung from the AA model. Research by Room and Greenfield (1993) shows that 9 % of the adult U.S. population have attended at least one AA meeting at some time, and 3.6% have done so in the past year.

In the Project MATCH study referred to earlier, subjects (N = 1,726), taken from two different populations (outpatients and aftercare patients) were randomly assigned to three treatment methodologies: Cognitive-Behavioral Therapy (CBT), Motivational Enhancement Therapy (MET), and Twelve-Step Facilitation Therapy (TSF). The TSF Therapy is spiritually based, and has as its objective a fostering of acceptance of the disease of alcoholism, encouraging commitment to participate in the AA program, and beginning to work the 12 steps, (p. 13). Nowinski (1996) elaborates on this therapy by describing it as “philosophically and pragmatically compatible with the 12 steps of AA” (p. 39). Nonetheless, the Project MATCH Research Group emphasize that TSF is individually delivered, and in this respect departs sharply from the AA program (p. 24). On the basis of the foregoing description, Project MATCH claims to be “the first demonstration in a randomized clinical trial, controlling for other treatment factors, of comparable outcomes from a 12-step-based approach and other treatment methods” (p. 24). Project MATCH made the following conclusions:

The findings suggest that psychiatric severity should be considered when assigning clients to outpatient therapies. The lack of other robust matching effects suggests that, aside from psychiatric severity, *providers need not take these client characteristics into account when triaging clients to one or the other of these three individually delivered treatment approaches*, despite their different treatment philosophies (emphasis added) (p. 7).

#### Methodology

Several researchers have noted the difficulty of applying ideal research methodologies and

procedures in the field of alcoholism (Miller & Kurtz, 1994; Nowinski, 1993). One difficulty is in locating subjects (Tonigan & Hiller-Sturmhofel, 1994; Page, 1986; Royce, 1989). Another lies in the ethical considerations and need for maintaining anonymity (McMcrady, 1993; Bradley, 1988).

### **Instrument**

Based on reviews of the literature, the current study employed a 23-item questionnaire designed by the researcher. All respondents were self-described members of Alcoholics Anonymous, all resident in British Columbia, Canada. The questionnaire focused on knowledge about the AA program and belief in its efficacy. It also asked about other treatments, frequency of meeting attendance, adherence to AA suggestions about sponsorship and home meetings, likes and dislikes about AA, step difficulty, demographic information, and provided room for other comments. Ten questions were multiple choice, six were yes or no, and four were fill-in-the-blanks. Three questions were open-ended because of their usefulness in an otherwise quantitative study (Glesne & Webb, 1993).

### **Respondents**

A total of 113 respondents were obtained by attending 22 closed meetings of AA as well as one AA convention and asking attendees to complete the questionnaire (the researcher qualifies as a member of AA). Subjects were solicited prior to and immediately following meetings. Some subjects claimed time constraints, in which case a stamped, addressed envelope was provided. More than half (58%) of all responses were obtained by mail. Of the 65 stamped envelopes provided to participants, 59 were received, yielding a response rate of 90.8%.

### **Pilot Study**

For purposes of assessing armchair validity and internal consistency, Masters level students at University of Victoria as well as AA members tested the questionnaire. As a result of their responses and suggestions, appropriate modifications were made. There were five questions to measure knowledge of the AA program, each of them intended to measure different aspects of AA, including its main purpose, one of its steps, its group policy, one of its traditions, and the cost of membership. It was known from the results of the pilot questionnaires that the general academic population yielded correct answers little different from chance. It was also known that these same questions, when asked of members of AA, would probably result in very high scores. When this became apparent from the pilot studies, it was concluded that knowledge about AA can be considered an esoteric subject, that is: well-known to few and little known to others, in spite of the fact that as Chappel records (1993), "there is no dogma, theology or creed to learn" in the AA program. In all cases, AA literature is the final authority as to the correctness of answers to the questions.

### **Results**

Data from the questionnaire were coded and analyzed using appropriate calculations. Frequencies, percentages and measures of central tendency were computed and displayed in tabular form.



## Knowledge of the AA Program

The responses to questions one through five, which queried knowledge of the steps, membership charge, the primary purpose of AA, its group format and policy on closed meetings yielded a combined 549 correct answers (97.2%) out of a possible 565.

Ratings of alcoholism treatment effectiveness showed a preference for AA itself (46%), a combination of counseling and AA (33.6%), followed by a combination of counseling, AA, and a family doctor (14.2%). All 113 participants responded to this question, and all other combinations of treatments received little support.

In a later question, participants were asked to *rank order*, as opposed to *rate*, treatments for alcoholism. AA received 101 of the highest ranking, professional counseling dominated the second ranking, with treatment by a family doctor and others, which were specified, far down in the rank order.

Duration of continuous sobriety was reported as less than one year, 21.2%; one to five years, 38.9%; five to 10 years, 12.4%; 10 to 20 years, 15%; and more than 20 years, 12.4%.

When AA respondents were asked about step difficulty, they rated Step Four as most difficult (15.9%), closely followed by Steps Six (14.2%) and Seven (8.9%). No other steps stood out as presenting difficulty to program members.

## Discussion and Summary

This research adheres to the primary belief: "if you want to know about AA, ask the people who are in the program." To measure knowledge of the AA program a series of statements was taken from AA literature and adapted into questions. These esoteric questions are a valid and reliable instrument to discriminate members of Alcoholics Anonymous from any other population.

Being capable of answering questions about AA is one thing, and applying the tenets of the program into their life is another. Taken individually, the answers to these questions have armchair validity about program commitment by the AA subjects polled. Collectively, the answers are a powerful indicator of such compliance.

As to the subject of belief in the efficacy of the program, this was measured by the question that rated treatments (Question 7), and subsequently confirmed by the slightly differently worded Question 10, which asked for a rank order of the same treatments. Additional information can be garnered from Questions 19 and 20, which relate to previous treatment and inquire about current treatment, respectively. Although there is not every confidence that the trend between the two questions, showing less subjects employing another treatment now compared to prior to becoming a member of AA, the trend is nonetheless a significant one. The direction would at least suggest that AA is a sufficient treatment unto itself *for some people*. The other side of the coin is the obvious fact that at least 23% of subjects feel that they require adjunctive treatment for alcoholism. Whereas AA may constitute a powerful treatment methodology, one that dominates alcoholism treatment, the search for alternative therapies is justified and appropriate.

AA members evidence a high degree of compliance with the AA program according to their reported behaviors. Question 9, which measured meeting attendance frequency, showed that

93.8% of all members polled attend at least one meeting a month, while two-thirds attend more than once a week. These results should be placed in the context of individual clients voluntarily taking the time to administer, in effect, their own treatment. Another compelling piece of evidence lies in the responses to Question 11, which related to having a home group, as is recommended by the AA program. 85.8% reported program compliance with such behavior.

Of course there is a difference between attending a meeting and joining a home group. Belonging to a group is a recommended activity of the AA program, and as such it is a reliable and valid measure of program compliance. Question 12 concerned itself with sponsorship; AA recommends that members have a sponsor. In actual AA practice, selecting a sponsor is something of a ritual. By tradition, the sponsee approaches the sponsor and requests that a relationship be established. It is the position of this thesis that having a sponsor is a strong indicator of program compliance by members.

The response to Question 13 (are you an alcoholic?) can also be interpreted as compliance with and belief in the program. AA promotes the view that alcoholism is a "malady". Furthermore, the AA literature insists that treatment and abstinence from alcohol are life-long necessities (once an alcoholic, always an alcoholic). Many researchers have pointed out the fact that the AA position on the medical model also serves to alleviate shame for its members.

The results of Question 13 "Do you consider yourself to be an alcoholic?", are remarkable in that even though an alternative to "yes" or "no" was provided in the questionnaire (namely "sometimes"), not a single subject selected it. The "sometimes" alternative was a reasonable one, and frankly was designed to capture those respondents who even occasionally entertained doubt about their condition. However, the results of this question was 100% yes, which is consistent with the AA credo, and which corroborates evidence of strong compliance with the program.

The two most astonishing conclusions in current alcoholism research today are those of Project MATCH, which found that it did not matter which of three treatments were assigned, in the absence of serious psychopathology, the results were the same. The other is the recent findings of Vaillant and Hiller-Sturmhofel that "about 2% of alcoholics return to stable abstinence each year, with or without receiving treatment" (1996, p. 157).

Like any consumer feedback, the information from these questions can be applied to the research on treatment-client matching. Any treatment program existent, or designed in the future, should include the information about what people like and do not like. If the research history is clear on anything, it is clear that client involvement and commitment should be encouraged in any alcoholism treatment.

One of the strongest expressed likes of AA members fall into the category of Social Aspects (see Table 14). These are generally characterized by such words and phrases as "fellowship", "the people", "the meetings", "acceptance", etc. Almost two-thirds of respondents chose such social terms. The balance almost all selected functional aspects, such as "the steps", "the traditions", "it works", etc.



On the other hand, when asked about dislikes, the majority either had no dislikes, or no opinion. Of those who did name a dislike, the majority of these were either smoking or the coffee, both of which are avoidable.

Question 17, which related to step difficulty, pinpoints a vulnerability of the AA program. Almost any veteran of the program could probably have predicted that Step Four is a difficult step. This step ("Made a searching and fearless moral inventory of ourselves") calls for insight beyond the experiences of most newcomers. Although the Big Book does describe this step, and in fact provides a fairly detailed description of how to proceed, in the final analysis it is up to the individual to interpret. It is not surprising that books have been written on this subject alone. Step Four is a complicated one.

What is surprising is that right next to Step Four in reported difficulty is Step 6 ("Were entirely ready to have God remove all these defects of character"). Step Four received 18 mentions, while Step Six received 16. I personally know of no special arrangements, made by AA or any of its offshoots, that concentrates on helping clients comprehend Step 6. This could be a major finding in AA research. Step Seven, even more obscure than its predecessor, also attracted a substantial number of votes as the most difficult, with 10. The combination of the two steps are named by more than one third of those polled, outdistancing Step Four in reported difficulty. It is likely that the reported difficulty with steps Six and Seven are the result of a perceived threat to the identity of the person negotiating these two steps. The two steps go together, and read as follows:

6. *Were entirely ready to have God remove all these defects of character* (AAWS, p. 57).

7. *Humbly asked Him to remove our shortcomings* (AAWS, p. 57)..

The main stumbling block seems centered on the comprehensive word "all" in describing the defects of character to be removed. Some members reason that they would like to hang on to some part of themselves, even if that is a "defective" part. Thus it may be that fear of losing one's identity is at the root of the "difficulty" of these steps.

Unfortunately, the nature of researching a subject such as AA, with its emphasis on anonymity, is difficult. At the same time, within the framework of these difficulties, the researcher has been attending AA meetings for more than 22 years, and has the advantage of being able to attend closed meetings. Open meetings, which are the subject of most research on AA, are different from closed meetings in that the attendees may or may not be members of AA. This researcher has observed a noticeable difference in the intensity between the two types of meeting. By definition, also, Open meetings may not be representative of AA meetings, depending upon the number of AA members present.

The results of this study show that almost half the members (48.7%) had undergone the setback of drinking again, yet resumed their attempts at recovery. Much may be learned by comparing the results of a similar question asked of those undergoing therapies different from AA. Implicit in this and other alcoholism treatment research is the matter of high attrition as experienced by AA. According to virtually every study on the subject, there is a steady decline in membership when measured by length of sobriety. Obviously some people go back to drinking, some die, and some stay sober without attending AA. A tantalizing research subject is, "What

happens to AA members over time? What happens to those who stop attending AA meetings?" If, as AA maintains, AA is a program for living, study people living the program but not attending AA: in other words, AA dropouts. These people would fall into two categories, those who abstain, and those who continue to drink socially. How might these two populations compare to each other in terms of "degree of alcoholism", such as could be implied from the Johns Hopkins 20 Question Test? Research in this direction would potentially provide a wealth of implications for alcoholism treatment, and would tend to sustain or refute the AA position that "once an alcoholic, always an alcoholic". Research into this series of questions will be the subject of my doctoral dissertation.

This study is probably generalizable to Canada and the U. S. Confidence in the results flow from the similar demographic findings to those of the AA Survey of Canadian and American subjects. If there is a shortcoming to this study it lies in the methodology, for participant selection was more or less by convenience, and not random. These results will be compared to a duplicate study to be undertaken in Australia.

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Efficacy and Successful Adjustment to Aging  
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It is significant that we have chosen older persons as the focus of our presentation on this last day of 1998, for the United Nations has chosen 1999 as the International Year of the Older Person. Projections for increasing longevity for world populations in the new millennium are coming from a number of national and international agencies (Takamura, 1998; World Health Report, 1998). Takamura (1998) reports that it took thousands of years for our species to reach a life span of 47 years. Yet, in a little less than 50 years, average life expectancy in the United States increased more than 30 years for women, and the World Health Organization (1998) reports that no country will have a life span of less than 50 years by the year 2025.

As life spans increase, the ability of older persons to enjoy a better quality of life becomes an important focus for counselors. The purpose of this paper is to present a framework for discussing some factors that are associated with successful adjustment to aging. We frame the discussion around the psychological concept of efficacy, intra-psyche perceptions having been linked to effective coping (Lachman, 1985; Langan & Marotta, 1998) and to sources of satisfaction in many world cultures (Lightsey, 1996). Self-efficacy is defined for purposes of this paper as an older person's perception that she or he can adjust to the exigencies of life in a reasonably effective manner; these perceptions then result in instrumental behaviors called coping. We will begin with adjustment to aging and some issues associated with the measurement of personal values among older persons. We then will explore the relationship between cultural attitudes and adjustment among older persons of Asian, European, Caribbean, and U.S. heritage. Finally, we will hypothesize about potential barriers to adjustment for counselors to consider when assessing and working with older persons from three successive age cohorts exposed to war, economic instability, and unpredictable medical conditions.

#### Adjustment to aging.

The area of study that I will describe, I call adjustment to aging. It can be readily noted that as people grow older, they adapt to changes with more or less ability. Some people resist the changes and may deny them or be angry and upset, clearly unhappy to have to deal with them. Others take changes due to age with much more ease. This is not to say that all changes with age are negative ones or losses, but even positive changes such as increased experience and improved judgement and wisdom, may be denied or minimized by some and valued by others.

The conceptual framework and instrument I will describe is based on more than 30 years of research on acceptance of disability and more than 50 studies done with the Acceptance of Disability (AD) Scale which I developed in the mid-1960s. The AD Scale has been validated on several samples of individuals of various ages and having many different disabilities including physical and mental disabilities. It is found to relate to low depression, internal locus-of-control, positive self esteem, involvement in self-help groups, satisfaction with social relationships,

androgeny, and spiritual well-being. Clearly these are measures of adjustment and thus the AD Scale has been successfully used as a criterion measure in several intervention studies including social skills training, assertion training, participation in wheelchair athletics, and surgery of malformed genitalia of adolescents (Linkowski, 1987).

This research is an extension of the conceptual framework developed by Dembo, Levitan, and Wright (1956) and Wright (1981) of acceptance of loss. As modified to apply to the values and value changes associated with adjustment to aging, the following conceptual framework has been developed.

Subordination of Youth Attributes. It is posited that individuals who make better adjustments to aging are those who can realistically recognize that they may not have the same physical agility, energy, or health as they once had when younger. Thus there is a de-emphasis on characteristics specifically associated with a younger age. Sample item (in negative direction): A youthful physical appearance and physical ability are the most important things in life.

Enlargement of Scope of Values. This posits that those persons who explore new areas of interest and importance of values consistent with one's own abilities will be better adjusted than those who do not. Sample item (in positive direction): Personal characteristics such as honesty and commitment are much more important than youthful physical appearance and ability.

Containment of Aging Effects. This is to say that with aging, some areas relating to physical ability and capability may be changed or lost, but many areas remain and may be improved with age. Those who make a better adjustment are better able to not generalize aspects of themselves as less able, because of diminished capacity in some areas. The opposite of containment is spread, where because a person is no longer able to do some things, they feel that they are less worthy or helpless. Sample item (in positive direction): At my age, I know just what I can and cannot do.

Transformation of Comparative Values to Asset Values. This concept is very similar to the acceptance of disability concept of appreciating the characteristics and attributes that one has, rather than feeling bad because they can no longer do some things they could when they were younger or which other people can do. Instead the person takes satisfaction and pride in what they are able to do. Sample item (in negative direction): It makes me feel very bad to see all the things a younger person can do which I cannot.

Currently the items of the instrument are being revised and will be available on my web site <http://gwis2.circ.gwu.edu/~dcl>

## Culture and Aging

The process of aging is somewhat dependent on the culture that has been a part of one's adult life. How a culture names old age is often an indicator of the attitude of older adults in that culture. Whether one becomes an "elder" or whether one becomes a "senior" or one of the "elderly" is either distressing or comfortable according to the cultural articulation. In Native



American or American Indian communities, “elders” are revered, are often the wisdom holders and advisors, and are treated as respected family members. For example, in the community of Kumayaay Indians in southern California, adults become elders when they are in their fifties. At tribal gatherings, they are served their meals first and are expected to eat heartily. The children are served after the elders and then other members of the community are served. Elders have membership on the tribal council, are not expected to hold a job, and they make major decisions regarding the profits from a small casino on the reservation. (Hudson, 1998). It is understandable, therefore, that Kumayaay adults look forward to becoming an “elder”.

The “elderly” in Euro American cultures, on the other hand, are often warehoused in institutions or nursing homes. The typical Caucasian family does not bring the aging family member home to live with family as primary caretakers. Instead, adult children search for a good facility and are pleased when they find an adequate placement for their elderly parents. Many Euro-Americans consequently fear old age. This is radically different from the general practice in Ireland where family members are expected to “bring home” the aging family member who can no longer manage on his or her own. Nursing homes in Ireland are for those who are too ill to be cared for at home. There are no housing developments for the retired in Ireland such as those that crowd the landscape in Florida, USA.

In the United States, “Senior citizen” is a term often used for special services or clubs and seems to indicate that older retired adults are engaged in some activity. For example, a 77 year old retired senior citizen was called “activist extraordinaire” because she engaged in meetings, conferences, workshops and speaking engagements. She is quoted as saying “The plow that rests, rusts” (Kelly, 1989). When the word used for an older person is “old”, however, it seems to imply that a person is not capable of self care and might even be senile or unable to normally communicate. One recent study reported that German nurses regularly communicated with their old patients in Secondary Babytalk regardless of the patients’ mental capabilities (Sachweh, 1998). In some Asian and Pacific Island cultures, older people are the transmitters of cultural heritage and the social significance of the festivals and therefore are treated as important members of the community. A study that compared African American to white parents found that Afro Americans believe they are entitled to more support and have higher filial expectations than do whites (Lee, Peek & Coward, 1998) an attitude that is conveyed to children throughout their lives. It is clear that cultural practices influence the way people approach their own aging process. Counselors must be open to exploring the implications of cultural heritage if they are to work effectively with this population..

#### Self-efficacy and psychosocial stress.

To illustrate some assessment issues that can arise for counselors working with older persons, a case study is presented. Maria is a widow of Hispanic descent, whose recent hip injury necessitated her moving in with a daughter. She lost her husband five years previously, but since that time had lived independently in the family home. Her daughter, who accompanies her mother to the agency, refers her to counseling. Maria’s daughter describes her mother as experiencing uncharacteristic outbursts of temper, and difficulty sleeping. Supposing that Maria was variously 65 years old, 75 years old, or 85 years old, a counselor might generate three very



different sets of working hypotheses about Maria's self-efficacy following her injury. Some of these hypotheses may include suppositions about cohort effects and social support systems.

Cohort effects are those individual differences that are attributed to membership in a generational group (Knight & McCallum, 1998). For example, an 85-year old Maria was born in 1913. Her early childhood experiences might have been influenced by such pandemic illnesses as the influenza that killed millions in 1918. In addition, she has lived through several world wars. What effect might these experiences have had on her and her caregivers' attachment style? Attachment style has been linked to effective instrumental behaviors (Lopez, 1995). Maria at age 65, born in 1933, might not have been similarly affected. In both cases, the counselor needs to assess attachment based on cohort effects, perhaps employing a life review technique or other form of historiography. Both the counselor and Maria's daughter, if they belong to an age cohort that is significantly different from Maria's, will have to examine their own cohort effects to determine the extent to which they may be filtering their assessment through generational lenses.

Social support has been positively correlated with healthy adjustment, and negatively correlated with poor mental health outcomes (McFarlane & van der Kolk, 1996). In assessing Maria's support systems, the counselor must be aware of the cultural value that Hispanic people place on family as a support network, a value that may foster dependence in the name of support for a person with a disability (Garcia & Marotta, 1998). One of the pitfalls in assessing Maria's ability to cope with her injury and the change in her living status lies in belief systems that counselors may hold about aging as a series of necessary losses. Should a 75 year old Maria be expected to grieve the loss and accept limitations of movement more so than Maria at 65 years old? Unless counselors have been trained in gerontology, they may not know that only 1.4%-24% of people in the U.S. ages 65-85+ live in nursing homes or residential care facilities (APA, 1998). This means that the majority of older persons live independently or with assistance from family members. Both Maria's and her daughter's cultural values and beliefs, and their perceptions about disabilities, must be factored into an assessment of Maria's self-efficacy.

## Conclusion

Counselors who work with the increasing numbers of older persons which are projected to comprise the population in the 21<sup>st</sup> century must be cognizant of the factors which may promote or impede self-efficacy. More research is needed to explore the healthy adjustment to aging, and to measure the effects of cultural influences, cohort effects, and social support systems.

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## Chained to the Desk: Family Dynamics in Workaholic Families

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### Introduction

The subject of work addiction in the mental health literature has been downplayed or ignored presumably because of the difficulty of defining workaholism and reaching this obscure population (Robinson, 1996). Workaholism is the best-dressed mental health and family problem of the twentieth century. Lack of research on the topic is an indication of how it is viewed by mental health practitioners, the scientific community, and society in general. It is minimized and enabled at the microsystem, mesosystem, exosystem, and macrosystem levels in our society (Robinson, 1998a). Instead of helping workaholics deal with their work addiction, well-meaning clinicians often prescribe work as a solution to their problem.

### Typology of Workaholics

Robinson (1998a) developed a typology of workaholics based on their level of work initiation in proportion to their work completion. The stereotyped workaholics were classified as *relentless workaholics*--those who are high work initiators and high in work completion and who work compulsively and constantly day and night, holidays and weekends with no let up, no periods of downtime. They are hurried and relentless in meeting deadlines, often weeks ahead of schedule. *The bulimic workaholic*, who is low in work initiation and high in work completion, has extreme work patterns that vacillate from bingeing to purging. This is the procrastinating workaholic whom Fassel (1990) called the *work anorexic*. *Attention deficit workaholics* are adrenaline-seeking workaholics who are easily bored and constantly seeking stimulation. They are high work initiators but low in work completion. They have difficulty keeping their focus on the task before them, get bored, and jump ahead to the next item on the agenda, leaving many projects unfinished. *Savoring workaholics* are slow, deliberate, and methodical. Consummate perfectionists, they are afraid that the finished project is not going to be good enough. They savor their work just as alcoholics would savor a shot of bourbon. They are low in work initiation and low in work completion, because they prolong and create additional work when they realize they are nearly finished with a project. They are nit pickers who over analyze, get bogged down in detail, and re-examine tasks to the point that it impedes their ability to initiate and complete work in a timely fashion.

Although the term has been variously defined in the literature, *work addiction* is defined in this article as an obsessive-compulsive disorder that is progressive, potentially fatal and that is characterized by self-imposed demands, compulsive overworking, inability to regulate work habits, and an overindulgence in work to the exclusion of most other life activities (Robinson, 1998a).

## The Workaholic: Review of the Research

In one of the first empirical studies to relate work addiction to psychological and relationship factors, workaholics had significantly higher scores on depression, anxiety, and anger than non workaholics (Haymon, 1993). These findings confirm earlier anecdotal reports that work addiction has severely negative consequences which include depression, anxiety, and anger (Fassel, 1990; Oates, 1971; Robinson, 1989) and that underneath obsessive work habits are the workaholic's inferiority feelings, fear of failure, and defense against unresolved anxiety (Pietropinto, 1986; Spruell, 1987).

In a national study researchers administered questionnaires to assess work addiction as defined by high scores on measurements they termed "Work Involvement and Drivenness" and low scores on a measure of "Enjoyment of Work" (Spence & Robbins, 1992). This large-scale study, similarly to the Haymon (1993) study, also confirms many of the early clinical reports (e.g., Oates, 1971; Pietropinto, 1986; Robinson, 1989) by suggesting that workaholics, compared to non workaholics, have more health complaints, have more difficulty delegating, feel more stress from the job, and tend to be perfectionists.

## The Workaholic Family: A Review of Research

Recent findings corroborate increasing information that work addiction, like alcoholism, takes its toll on other family members living in work addiction. The structural and dynamic characteristics of the workaholic family indicate that all family members are negatively affected by workaholism and that they may develop a set of mental health problems of their own (Robinson, 1998b). The structure of the workaholic family system is such that spouses and children become extensions of the workaholic's ego, inevitably leading to family conflict.

Over time family members build a pattern of responses to their loved one's work addiction (Robinson, 1998b). Spouses, not unlike alcoholic spouses, become consumed with trying to get workaholics to curb their compulsive behaviors and spend more time in the relationship. Spouses and children of workaholics report feeling lonely, unloved, isolated, and emotionally and physically abandoned (Robinson, 1998b). They may habitually complain or become cynical about the workaholic's abusive work habits. A common refrain is that even when workaholics are physically present, they are emotionally unavailable and disconnected from the family. Spouses of workaholics may have single-handedly raised the children and complain of having the major portion of parenting responsibilities dumped on them. Filled with resentment of this one-sided arrangement, they tend to react with anger and complaining. Some workaholics then use the verbal complaints as justification for their physical and emotional aloofness. Thus, circularity often occurs when workaholics assert, "I wouldn't work so much if you wouldn't nag me all the time" where upon spouses retort, "I wouldn't bug you so much if you didn't work all the time."

A national study provides evidence which suggests that work addiction can lead to brittle family relationships, contribute to marital conflict, and create dysfunction within the family (Robinson & Post, 1995, 1997). Work addiction was significantly correlated with current family functioning. The higher the work addiction scores, the higher the degree of perceived dysfunction in one's current family. Greater work addiction was related to less effective problem solving, lower communication, less clearly established family roles, fewer affective responses, less affective

involvement, and lower general functioning in families established in adulthood.

### Spouses of Workaholics

No empirical studies exist on the spouses of workaholics directly assessing their perspectives of living in work addiction. The information that is available comes from magazine surveys (Herbst, 1996; Weeks, 1995), a poll assessing the perspectives of physicians (Pietropinto, 1986), and case study reports (Robinson, 1998b).

Results from a group of 400 physicians regarding their observations of workaholics as marital spouses indicated that workaholics devote an inordinate amount of time to work as opposed to marriage and they have higher than normal expectations for marital satisfaction (Pietropinto, 1986). They are more demanding of achievement in their children than nonworkaholics and their typical approach to leisure time is to fill it with work activities.

A 10-point profile, developed from hundreds of case studies from spouses of workaholics, included the following themes (Robinson, 1998a):

1. Feel ignored, neglected, closed out, unloved, and unappreciated because of the workaholic's physical and emotional remoteness.
2. Believe they are carrying the emotional burdens of the marriage and parenting which brings a feeling of loneliness and aloneness in the marriage.
3. View themselves as second choice behind work, because family time is dictated by work schedules and demands which come first.
4. Perceive themselves as extensions of the workaholic who must be the center of attention
5. View themselves as controlled, manipulated, and sometimes rushed by their partners who "call the shots."
6. Use attention-seeking measures to get their partners to see them or give in to conversations and activities around work in order to connect with them.
7. View the relationship as serious and intense with a minimum of carefree time or fun
8. Harbor guilt for wanting more in the relationship while their partners are applauded by colleagues and society for their accomplishments.
9. Have low self-esteem and feel defective in some way that they cannot measure up to their partners, who are often put on a pedestal.
10. Question their own gratitude and sanity when faced with the accolades bestowed on their workaholic spouse.

### Children of Workaholics

Case studies of children of workaholics indicate that offspring of workaholics become resentful of their parents' emotional absence (Oates, 1971; Robinson, 1998a). Psychologically unavailable to their offspring, workaholics generally do not take an active role in their children's development. When they do, it is often to make sure that their children are mastering their perfectionist standards. Expectations are often out of reach for children of workaholics who internalize their failure as self-inadequacy. The anecdotal literature suggests that many children of



workaholics carry the same legacy of their workaholic parents: they become other-directed and approval seeking to meet adult expectations (Robinson, 1998a).

It has been argued that in workaholic-headed families the generation lines that typically insulate children from the parental adult world get violated or blurred and these children become what family therapists call parentified (Robinson, 1998a, 1998b). *Parentified children* by definition are parents to their own parents and sacrifice their own needs for attention, comfort, and guidance in order to accommodate and care for the emotional needs and pursuits of parents or another family member (Chase, 1998; Jurkovic, 1997). Workaholics, who were parentified as children, often pass their own parentification on to their offspring who are chosen to be emotional surrogates for the missing workaholic parent. A typical example is the child who is elevated into an adult position within the family system to accommodate a parent's emotional need for intimacy by becoming the adult of the house during the workaholic parent's physical or emotional absence. The gap of having to forfeit childhood--leaving youngsters void of feelings of approval, reassurance, love, and the comfort and protection from adult pressures--shows up years later as an oft-described, "empty hole inside" (Robinson, 1998b).

The first and only empirical study of 211 adult children of workaholics indicated that family of origin dysfunction may get passed on to offspring (Robinson & Kelley, 1998). Results indicated that adult children of workaholic fathers suffered greater depression, anxiety, and external locus of control than the comparison group of adults of non workaholic fathers. The findings corroborate similar findings among children of alcoholic populations, compared to adult children of non alcoholics (Robinson & Rhoden, 1998).

### Suggestions For Practitioners

More empirical research is needed on the psychological problems and adjustment of workaholics, their children, and their spouses. Currently, only one study exists on the perceptions of the children (Robinson & Kelley, 1998); however, this study is a retrospective account from an adult perspective. Although we have a body of research on young children of Type A parents, no studies exist on young children of workaholics. Moreover, we have clinical accounts on spouses of workaholics (Pietropinto, 1986; Robinson, 1998a), but no study has ever been performed assessing the attitudes, feelings, and psychological adjustment of spouses of workaholics.

It is imperative that clinicians and social scientists pay more attention to the subject of work addiction so that we can accrue a better working knowledge of the condition. An increase in the sheer quantity of studies is needed--studies that include direct assessment of workaholics instead of polls of physicians or magazine readers who speak about the workaholic.

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# **USING MEDIATED LEARNING EXPERIENCE PARAMETERS TO CHANGE CHILDREN'S BEHAVIOR: TECHNIQUES FOR PARENTS AND CHILDCARE PROVIDERS**

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## **Introduction**

Our world requires that individuals be adaptive, responsive, and amenable to learning both tasks and processes which are almost unimaginable as we project from this point in time into the future. The goal of parents, teachers, and childcare providers is to find ways to help children develop their learning potential, thereby facilitating both integration into society and enhancement of further learning propensities--needed by them to adapt, and by the society for its advancement and perpetuation. Israeli Professor Reuven Feuerstein's theory of structural cognitive modifiability (SCM), and its applied constructs of mediated learning experience (MLE) serves to frame potential interventions in this area of concern.

There are two foci for this work: (1) creating conditions for the enhancement of learning potential for all individuals, as part of the normal parent/child interaction, and directed toward helping parents maximize the developmental interactions that are part of the typical and available life space they experience; and (2) addressing the child with special needs, for whom impairments of development caused by a wide variety of conditions require specially designed and implemented interventions to overcome barriers to development. With regard to the first focus, one needs a belief system that accepts and searches for conditions of modifiability, and activates behaviors and functions to realize them. In the second focus, the more stressing and interfering conditions caused by "distal" etiological factors require that we identify specific impediments, develop strategies to overcome them, use the strategies in a systematic manner, and actively direct our "proximal" efforts to create modifiability (where it is difficult to envision, or has been predicted not to exist). SCM gives us the optimism and directionality to pursue these efforts, and shows us how to achieve changes through systematic, organized, and focused activities. Moreover, such actions are not limited to the "professionals," but must be mounted by all of the significant, intentioned adults in the life of the child.

This work shows that such efforts are both needed and possible, and that from theory one can develop practices, which can be understood, taught, utilized and monitored, and which become the basis for an optimistic, active response to the developmental and special needs of children. What follows is a brief description of the conceptual and activity focus of a training program for

parents and childcare providers (who will both work directly with children and consult with parents as they interact with their children).

### **Relating MLE to the Development of Cognitive Functions and Social Learning**

Developing a belief system that supports the use of MLE is essential to its efficient application. As individuals consider elements of modifiability and mediation, it is necessary to identify and demonstrate a number of points that will later become manifest in observations of child behavior and activities which can be undertaken. The following are emphasized:

1. Intelligence is not a fixed "thing" which determines whether a child will learn, think, problem-solve, etc. All levels and ranges of ability are able to learn, given proper conditions.
2. Thinking, learning, and problem-solving require cognitive functions, which are acquired through experience, and can be observed, modified through intervention.
3. Cognitive learning occurs under two conditions: direct exposure to stimuli and experiences, and mediated learning experience (MLE). Both are essential to human learning and development.
4. MLE is necessary for all human learning. The amount, quality, intensity, frequency, and duration will vary as a function of the individual differences in children (the "distal" factors).
5. When MLE is insufficient or unavailable, the result is inadequate cognitive development, with limited academic and social learning. When MLE is adequate, prior limitations can be overcome and higher levels of cognitive and social development will be achieved.
6. Providing MLE is the essential role of parents, grandparents, older siblings, as part of the intergenerational transfer of culture. Effective cultures provide many instances of mediation, dysfunctional societies do not.
7. When cognitive development has not been sufficient, it is possible to apply MLE at later stages through specially constructed and applied interactions (parenting, teaching, counseling).
8. MLE can be learned and used by a wide variety of intentioned and concerned providers. These processes constitute an identifiable and important style of interaction--mediational parenting and teaching.

### **Operational Definitions of SCM and MLE: What Parents and Childcare Providers Need to Know**

The theory of SCM is complex, but lends itself to clear functional explication. The presence of cognitive structures (patterns of what has been learned and retained) can be easily described and

illustrated. There are three major characteristics that must be conveyed and understood (Feuerstein, in press):

- (1) Children are changed by changing cognitive structures, and each time a certain part of the child's behavior changes so too will the total "universe" of behaviors to which the part belongs;
- (2) there is a "transformability" in the changes, observed in the rhythm, rapidity, amplitude--the qualities of the behavioral response--and amenable to focus and guided attention as changes in one area will affect more and more general areas, which are the "processes" of the behavior; and
- (3) once changes have occurred, a "self-perpetuation" is generated where the individual (and the mediator) experiences a dynamic of continued modification, an active process of continued changes, as Feuerstein has described it, "projecting into the future the acquired changes."

Each of these characteristics can be identified in the behavior of children, and aspects of stimulating or eliciting behaviors to mediate them can be hypothesized. As described below, simple activities to observe or generate them can be devised and practiced.

Mediated Learning Experience (MLE) represents a theoretical and operational formulation of the interactions that can occur to facilitate cognitive and social learning. It is identified according to a number of "parameters" which guide the initiation and development of responses by the "mediator," who is animated and intentioned to focus, select, intensify, direct, and monitor the child's direct experience with the world. The overall goal of mediation is to heighten awareness, cause relationships to be observed and understood, to increase anticipation and further responsiveness, and the like. Through this process the "mediatee's" cognitive structure is affected. Feuerstein (1980) points out that "the (child, client, etc.) acquires behavior patterns and learning sets, which in turn become important ingredients of (his/her) capacity to become modified through direct exposure to stimuli" (p. 16).

MLE parameters can be organized into three clusters, and operationally described to identify criterial elements for both cognitive development and social/behavioral manifestations (Feuerstein and Feuerstein, 1991; Falik, 1996; Skuy, Mentis and Mentis, 1996). The mediator must learn to observe and identify both opportunities to provide mediation in all of these areas, where relevant, and to develop intervention strategies which are appropriately mediational. The parameters are:

\* **Universal Criteria:** present in all interpersonal interactions, and necessary to create the conditions for general development, comfort, extended and elaborated learning.

Intentionality and reciprocity: conveys a purposeful and directed interaction, with attention and activity focused on the purpose of the encounter, and containing focused attention and clear communication and direction.

Transcendence: bridges the immediate encounter to broader issues of experience and future meaning, identifying rules and recurring themes, directing the "here and now to anticipated future experience.

Mediation of Meaning: infuses the encounter with the importance and relevance of feelings and activities, identifying and confirming values, acceptance/validation of feelings and reasons for the interaction.

\* **Situational or Phase Specific Criteria**: related to specific situations or tasks which present opportunities for mediational interventions, but which cannot occur without the establishment of the mediational conditions identified above.

Mediation of regulation and control of behavior: experiencing and modifying environments to provide self-monitoring, making adjustments in responses or perspectives, developing skills through active structuring, developing insight into needs, skills, past and future experiences.

Mediation of feelings of competence: confirming (at a feeling level) abilities and skills, creating an optimistic belief in success, empowering confidence, task accomplishment, self reflections on abilities and achievements.

Mediation of sharing behavior: involving another individual in activities of cooperation and empathy, using listening and doing activities, openness and acceptance, and looking for the relevance of shared experiences.

Mediation of individuation and psychological differentiation: emphasizing the uniqueness and accepting the differences in the individual, valuing independence and diversity of behavior and reactions.

Mediation of goal seeking/goal setting/goal achieving/goal monitoring: encouraging the seeking of realistic goals, setting meaningful and achievable goals, planning their achievement, and monitoring their achievement.

Mediation of challenge, novelty and complexity: confronting novel, complex, difficult experiences with an optimistic approach to the real or perceived difficulty, structuring activities for positive outcomes by developing skills and supportive attitudes.

\* **Integrative Orienting Belief System Criteria**: necessary to integrate changes in functioning into cognitive structures for sustained behavioral change and self-perpetuation.

Mediation of an awareness of the human being as a changing entity: encourages the perspective of the possibility of self-change, with expectations of potential for growth and acceptance of changes already or to be experienced.

Mediation of the search for optimistic alternatives: facilitates awareness of potential for change and available opportunities in the range of available experiences, encourages the scanning of immediate experience and considering past experiences in light of their growth and change potentials.

Mediation of a feeling of belonging: confirming the connections at social and emotional levels between the individual and the world around him/her, validating the importance of relating to others, going outside the boundaries of self.

## **Applying the Theory and Concepts to Behavioral Change: Objectives and Structure of a Training Program**

A training workshop contains the following components, presented in the following order, comprising a conceptual and an experiential aspects. That is, understanding the concepts and processes is deemed essential to insightful and creative use of activities, and the understanding and use of already available resources. Our "cognitive" approach requires that we make the specific activities cognitive for the participants, so that the bridges and direction that ensues will be relevant and systematic (the mediation principles of meaning and transcendence). A typical workshop format requires 12 clock hours, divided into presentations of material, group discussions, practice exercises, and review and sharing of what has been learned.

- I. Introduction to the theory and concepts of cognitive modifiability and mediated learning experience: what is modifiability and where have you seen it; identification of direct and mediated learning experience; when and where have you been a mediator; what makes interventions and reactions to children mediational; how do we know when a behavior that is acquired has been incorporated into the structural repertoire of the child?
- II. Identification of cognitive functions: what do they look like; what is learned and why is it important; differentiating normal developmental tasks and the conditions that engender them; discerning deficient and fragile functions; describing functions in relevant modalities and venues (academic, social/peer group interactions, family interactions, neighborhood and community).
- III. Establishing the value system and goal expectations for the parent as mediator: values and beliefs of parents; functional and dysfunctional parenting interactions; observing and assessing behavior; identifying desired outcomes from mediational intervention.
- IV. Developing skills as a mediator: identifying activities and situations of mediational potential ("naturalistic" and specially constructed); developing verbal and behavioral skills that mediate behavior; focusing mediational interventions on the child to achieve specific outcomes; developing, planning, and monitoring mediational activities; evaluating the effectiveness of mediation, modification of mediational activities.

In order to achieve the above objectives, a series of materials are created, resources identified, and learning activities planned. These will vary according to the composition of the participants, and external structure of the workshop (number of sessions, proportion of parents to childcare provider professionals, etc.).

(1) The creation of a workbook of teaching materials to help participants understand the concepts and processes of cognitive modifiability and MLE. Wherever possible, schematic representation of the concepts is provided. These materials are used to guide discussions, link to examples and illustrations, and integrate the participant's understanding.



(2) An activity handbook containing a variety of worksheets relating to all aspects of the process of mediation: values identification and clarification; identification of needs and focus, observation of behavior, planning and monitoring activities, evaluation of effectiveness.

(3) Group process activities that give participants experience with various aspects of the mediational process. For example (but not limited to these):

(a) participants are asked to identify situations and events where they either witnessed or engaged in effective or ineffective mediation (can be in either individual recollection or in small process groups);

(b) choosing a particular child and describing basic functioning according to the development of cognitive functions, and linking potential interventions to them in relevant performance areas (again, as an individual project or collaboratively in small process groups);

(c) after selecting a target child/behavior, identify specific mediational objectives and plan activities which are proposed to achieve changes according to the dimensions of the MLE parameter;

(d) brainstorm activities which generally fit into MLE parameters;

(e) study already prepared activities (such as are available in several prepared mediational programs--c.f., Jensen and Jensen, *Parent as Mediator Program*; Lidz, *Let's Think About It*) from the perspectives of their mediational potential, feasibility for the situation of the participant, and adaptations to specific or individualized situations or needs of the child. With regard to the above mentioned programs, they provide activity workbooks and training suggestions which can provide "stand alone" experiences. It is our concern that an overall focus on MLE and cognitive modifiability should be provided as a cornerstone aspect of training if the activity focus does not become rote, automated, and without the lasting and meaningful structural change that the MLE approach emphasizes.

### **A Brief Review of Applications and Outcomes**

The above described training model has been presented several times, in a variety of cultures (United States, Singapore, Indonesia), and a number of times to international groups in a varied format in Israel. It is usually followed up with focused individual consultation, to better identify particular children and parental concerns, and offer advice and coaching on specific interventions. Evaluation feedback, both in written and verbal formats, indicate the efficacy of the model, and have suggested various modifications which have been incorporated over the three years of its use. Systematic, controlled research has not yet been done.



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## Empowering abused women: multi-cultural counseling techniques

ANN HARDIN, M.S.W., A.C.S.W.  
KELLY RENAE SUKOLA, B.S.W., M.A.

Ann is a Senior Individual, Marriage and Family Therapist with the Superior Court of Guam, Client Services and Family Counseling Division. Ann has been conducting groups for women in violent relationships since 1985. She presently co-leads the only education and recovery group which exists for any abused woman on the island. She is a member of the Governor's Task Force on Family Violence and she authored two chapters in the book titled "Family Violence on Guam." She has helped teach a course with the same name at the University of Guam. Also, she has conducted training workshops throughout Guam and on Saipan.

Kelly has been the co-leader of the T.H.R.I.V.E. (Teaching, Healing and Redirecting women In Violent Environments) group with Ann since its inception in 1995. Kelly initially helped with the group as a practicum student. She is highly committed to this population. Kelly completed her Master's degree in May of 1998 and is presently employed with the Department of Education on Guam as a high school counselor. Previously, she worked at the Victim Witness Ayuda Services with the Attorney General's Office.

Ann and Kelly have learned that cognitive teaching methods are ineffective in this highly diverse cultural setting. Many group participants know English on a limited basis and their thought processes are not western. This paper contains some of the many techniques used to empower women. Most techniques are experiential.

### INTRODUCTION

The island of Guam is composed of many cultures. The largest populations include Chamorro, Filipino, Chuukese, and Palauan. Within each of these cultures is a set of beliefs and practices regarding male and female roles. Historically, most of these cultures have dealt with problems such as partner abuse within their extended family system.

In the mid 1980's some of the counselors on Guam began to explore **oppressive family patterns**. This resulted in major legislative, child welfare, and law enforcement changes. This also resulted in a quest for treatment strategies which would meet the needs of this unique multi-cultural population.

Over the past thirteen years, the primary author has treated almost 1,000 survivors of partner abuse. She has found that through the use of experiential, culture -- sensitive techniques, women who seek to break free from the chains of oppressive practices can be empowered. She and Kelly are eager to present some of the techniques they have found useful.

### THEMES

Each week we choose a theme and help the participants explore that theme. Examples of the themes include SAFETY, POWER AND CONTROL, OPPRESSION, VICTIM BLAMING, WOMEN'S ANGER, GROWING UP FEMALE, THE EFFECTS OF ABUSE ON VICTIMS, HOW DOES OUR CULTURE CONTRIBUTE TO ABUSE, AND THE IMPACT ON CHILDREN. Throughout the

remainder of this paper, we will discuss how some of these themes are developed and presented in an experiential style. Actual techniques will be explained and demonstrated at the conference.

It is important to begin this process by placing yourself in the role of a victim who is trying to make sense out of what she is experiencing. It is especially important that we each understand what it might be like to be unable to fully comprehend what is being taught due to language and cultural barriers. For this reason, we ask each of you to take a visualization trip with us.

Please close your eyes. Take a few deep breaths and allow yourself to relax. Imagine you are on a flight to Australia. Due to mechanical problems, your flight is forced to land on a remote island where no one speaks English or whatever language is your primary language. When you awaken the next morning you discover that the flight crew has disappeared and you are the only passenger remaining. You use your nonverbal communication skills to obtain some of your needs and you find food and shelter. You are frightened by all of the animals, snakes and insects that inhabit the island. You fear you may never see the people you love again.

As time passes, some of the people laugh at you because you look and talk differently. Sometimes they hit you and throw things at you because they believe you are inferior to them. Your body is bruised, you have been humiliated repeatedly and you live in constant fear.

One day, a cruise ship comes to the island. You anticipate being rescued. You swim to the ship and beg to be taken on board. The people on the ship look similar to you but they speak a language different from your language. You are dressed in rags with no shoes, your body is bruised and you are trying desperately to get someone to understand your situation. You go to the ship's officers, people who look kind, and even to people who look mean. Finally you find one passenger who speaks a little English. You tell him about your situation. He looks at you with disgust and tells you everything that has occurred is your fault.

It is important that you remember that prior to your present dilemma you were a professional counselor with skills and intellect. You were accustomed to being treated with respect. Before you open your eyes, spend a few moments thinking about what you would do if you were in this situation. When you open your eyes, begin to write what you experienced and what you might do.

The exercise we completed is meant to help each of us understand what it is like to be in a situation where everything is different and difficult. A victim of violence in a cultural setting that is unfamiliar may have similar experiences.

We have found that the female role in partner abuse varies considerably within the island communities. In some island cultures, women have been taught to be violent. In some island cultures, women have power in many situations. Lastly, In some island cultures, oppression is covert and subtle.

A primary theme for each group is **PERSONAL SAFETY**. We help the women explore various things they can do to keep themselves safe in their present situation and plan for safety in other situations. The activity which compliments this theme is titled "**MY SHIELD**." Each participant takes time to identify the strengths and coping skills she possesses which have kept her alive and protected. We show the women examples of shields made by other women. They soon realize that their shield does not have to be an elaborate piece of art. There is no right or wrong way to create a shield and the women encourage each other as the shields are discussed in the group. The questionnaire and samples will be provided at the conference.

Another theme which is often presented is **WHAT IS DOMESTIC VIOLENCE: WHAT ARE THE REALITIES AND MYTHS OF PARTNER ABUSE?** Various methods of verbal expression are utilized. We have used a poem titled "**NINE DAYS OF ROSES**" to help the women understand their reality.

## NINE DAYS OF ROSES

I REMEMBER . . .

THE FIRST TIME YOU SAID YOU WERE SORRY AND YOU NEVER WANTED TO HURT ME.  
*A SINGLE ROSE YOU GAVE ME.*

THE FIRST TIME YOU PUSHED ME DOWN AND SLAPPED MY FACE.  
*A SINGLE ROSE YOU GAVE ME.*

THE FIRST TIME YOU KICKED ME IN THE STOMACH WHEN I WAS PREGNANT WITH OUR FIRST CHILD.  
*A SINGLE ROSE YOU GAVE ME.*

THE FIRST TIME YOU CHOKED ME AND THREATENED TO KILL ME AND THE CHILDREN IF WE EVER LEFT.  
*A SINGLE ROSE YOU GAVE ME.*

THE FIRST TIME YOU THREW ME ON THE BED AND FORCED ME TO HAVE SEX WITH YOU.  
*A SINGLE ROSE YOU GAVE ME.*

THE FIRST TIME I CALLED THE POLICE. YOU BLAMED ME AND SAID IT WAS ALL MY FAULT.  
*A SINGLE ROSE YOU GAVE ME.*

THE FIRST TIME I CAME HOME LATE FROM WORK. YOU ACCUSED ME OF SLEEPING WITH MY BOSS. YOU  
FORCED ME TO QUIT MY JOB.  
*A SINGLE ROSE YOU GAVE ME.*

THE FIRST TIME YOU LOCKED ME IN THE ROOM AND BEAT ME SO I COULDN'T WALK OUT OF OUR  
RELATIONSHIP.  
*A SINGLE ROSE YOU GAVE ME.*

THE FIRST TIME YOU HELD A GUN TO MY HEAD AND TOLD ME YOU WOULD NEVER LIVE WITHOUT ME.  
*A SINGLE ROSE YOU GAVE ME.*

THE FIRST TIME I RECEIVED SO MANY FLOWERS – TODAY! AFTER NINE DAYS OF ROSARIES AND MORE  
THAN NINE EVENTS WHICH RESULTED IN A SINGLE ROSE, I AM DEAD. YOU KEPT YOUR PROMISE.

By KELLY RENAE SUKOLA, HAGĀTÑA, GUAM,  
1998

Last year one of our professional colleagues (a former classmate of Kelly) was murdered by her ex-husband. He had threatened that he would kill their daughter in front of her. She had legally divorced him. He came to the house, killed the daughter in the way he threatened, killed her, and then killed himself.

The entire island was in shock. This was a very prominent family. The victim's brother was the priest at their funeral. This reality continues to haunt us.

Another theme is **DENIAL: I'M STILL ALIVE, SO WHAT'S THE PROBLEM.** To help each woman explore this theme, we use various exercises and writings which illustrate that when anyone is caught up in a violent relationship, they "can't see the jungle for the trees." Storytelling, a very popular way to pass on ideas, helps accomplish this task.

## THE LEGEND OF THE FRAGRANT PLUMERIA TREE

[DEDICATED TO TAN MARIA TORRES]

There was a young Chamorrita who lived in the village of Yigo. She had long, thick hair and delicate skin. She loved to swim in the ocean and walk in the jungle. One thing she especially liked was the delicate fragrance of Plumeria flowers. In the jungle where she walked was a little Plumeria tree that seemed more fragrant than any she had ever encountered. She would sit beside this tree whenever she wrote poetry, stories, or songs. Her heart was happy as she used her creative mind.

One day her grandmother warned her that a big typhoon was expected to hit the island. She immediately thought about the little Plumeria tree. She feared that the typhoon might blow the tree away. She ran into the jungle, cut a strong branch of the tree, and headed toward home to preserve it in a tin of water in case the rest of the tree was destroyed by the storm.

On the way home, the wind became so strong she was unable to stand. As she crawled along, the wind suddenly blew the branch out of her hand. She chased the branch until she caught it again. She realized that she could lose her own life if she continued to crawl along with the awkward branch. She stopped for a few moments, dug a hole in the jungle floor, and buried the branch for safe keeping.

After the storm had passed, she ran back into the jungle to see if the little Plumeria tree had survived. It had blown away as had most of the smaller trees. She then ran to the place where she thought she had buried the tree branch. She dug but could not find it. Every thing looked so different. The typhoon had destroyed so many things.

The Chamorrita grew older. She continued to go into the jungle as often as she could. Each time she would dig in places that seemed familiar. She hoped that some day she would find a remnant of the branch. Even though she had married and now had children of her own, she often had dreams about the night of the typhoon. She remembered some of what occurred but she could not remember where the branch was buried. She longed for that wonderful fragrance. She enjoyed the aroma of Plumeria trees everywhere on the island but none compared with the tree she had known long ago.

As the years passed, she was haunted by the loss of that tree branch. One day she was looking for some roots to create a special medicine for her grandchild who had been very ill. As she dug for a root, a beam of light suddenly hit the spot where she was digging. She looked down and discovered a very special locket she had been wearing the night of that strong typhoon. As she made this discovery, she realized that she was digging near a very big Plumeria tree. She took a deep breath and drank in the familiar fragrance she had kept in her memory. The branch she buried long ago had grown into the beautiful Plumeria tree which stood before her.

She began to laugh. In her desperation to find the branch, she had never stopped to consider the possibility that a tree could have grown as a result. She picked up her locket, tarnished with age, and gathered the roots for her grandchild. She picked a Plumeria flower for her hair and walked home to prepare the medicine for her grandchild. She walked a little faster than usual. She was in a hurry to tell everyone.

BY ANN HARDIN, HAGĀTNA, GUAM, 1997

An extremely important topic to explore is **VICTIM BLAMING**. When we address this often experienced phenomenon, we use a dramatization titled, "**Don't Blame Her.**" We hope to be able to present this very powerful visual experience at the conference.

Another theme which is popular is **WHY SHE STAYS?** To explore this victim-blaming issue, we use a metaphor titled, "**The Sand Castle Builder and the Dragon.**"

## THE SAND CASTLE BUILDER AND THE DRAGON

*Imagine a young woman skipping down the beach carefree, happy, and full of life. She happens upon a young man building a castle in the sand. She is intrigued by the detail he has included in his castle. She stops to admire his creative talents. They discuss his design.*

*Each day she stops to talk with him as she skips along the beach. She enjoys this very handsome and interesting young man. They talk about things, they laugh, and they begin to form a special friendship.*

*After some time, as she skipped down the beach one day she noticed that her friend was not in his usual place building a castle. As she approached the area, a FIRE-BREATHING DRAGON suddenly charged out of the jungle and headed straight for her. She ran down the beach. She managed to escape.*

*Every day after that she cautiously walked down the beach hoping to find her friend once again. Most days he was there. They talked and she was happy to be with him. She did not tell him about the dragon. Some days, when she least expected it, the dragon charged at her from the jungle and she ran for her life.*

*The girl began to avoid going to the beach. She wanted to be with her friend but she became so fearful of the dragon that she didn't know what to do.*

*As time went by, the dragon was waiting for her more often than her friend. One day the dragon caught up with her and burned her. Her friends and family came to see her at the hospital. They each told her not to go to that beach anymore. She knew they were right but she missed her friend. When the burns healed, she went to the beach.*

*After some time, she began to realize that she no longer enjoyed the visits with her friend. She longed for the way their time together used to be. Finally, she went to the beach one last time to tell her friend that she would not be coming to see him anymore. When she reached their place at the beach, the dragon charged at her and burned her so severely she never walked, skipped, or ran along the beach again.*

*ANN HARRISON, HAGATMA, GUAM, 1996*

Another theme often used in the group is **GROWING UP FEMALE**. We explore similarities in how each woman was treated as a child and we discuss differences in terms of male/female practices and cultural practices. One of the exercises we use to help each woman explore her childhood is a **COLLAGE** which is titled, "**My Childhood**." For many women this is the first time they realize that how they were raised had a significant impact on their

present situation. Another way the topic of **GROWING UP FEMALE** is explored is accomplished using a very simplified version of a **genogram**. We call it "**My Family Tree**." We explain that we are not just going to put all of the names on the family tree but we will also indicate who had substance abuse issues, who was abused, which pairs separated or divorced, who committed suicide, etc. This helps each participant visualize family patterns which may need to

be changed.

Another theme is **MY RIGHTS**. This is a very powerful exercise in which each woman is given an opportunity to identify the basic rights she wants to claim in her life. We have seen an incredible change occur in most of the women once they realize they have rights. Sometimes these lists are created on large sheets of paper. The group members then add their list to a group list. This activity seems to help empower the women. Along with listing rights, the women sometimes create a collage which is titled, "**What FREEDOM Means to Me.**" Cultural differences are highlighted extensively using this exercise.

Another theme is **SELF ESTEEM**. We use several activities to help participants explore their self-esteem. A difficult but powerful exercise is the "**Boasting Exercise.**"

Another very powerful exercise is the "**Positive Stroke Exercise.**" We also explore ways to increase self-esteem on a very slow but steady path.

The last theme we will mention is **AFFIRMATIONS**. Although this is something we hear frequently in western culture, it is not talked about very often in Asian-pacific cultures. We provide basic information regarding affirmations and a list of some affirmations to practice. Each woman selects one affirmation to practice three times each day during the next week. The following week, each participant tells the group what this was like for them.



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